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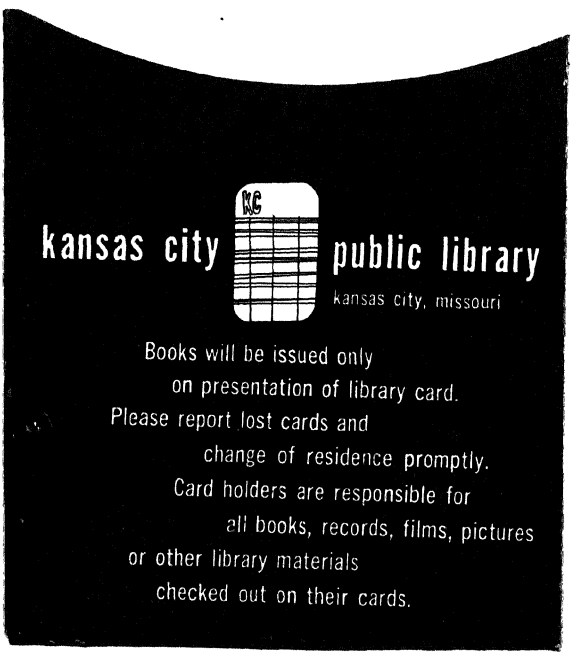
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THE MINISTRY OF HEALING

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THE MINISTRY OF HEALING

By

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Rector of the Church of the Heavenly Rest
New York City

Foreword by

THE RT. REV. HORACE W. B. DONEGAN, S.T.D.

Bishop of New York

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In Grateful Memory of

SAMUEL LESLIE

and

CAROLINE ESTELLE

FOREWORD

WHENEVER THE CHURCH neglects any aspect of her doctrine or duty, that neglected aspect will rise up to beset her—in distorted form. A neglected article of faith or an unexercised ecclesiastical function will always return—but usually in a debased and sometimes demonic way. It would be easy to adduce examples. A few will suffice.

A Church no longer radiant, joyous, or zealous soon engenders dissenting sects that are, unfortunately for all parties concerned, "enthusiastic," fiercely anti-intellectual, and running wild in emotionalism.

An established Church comfortably settled in a culture which does not criticize the Church because the Church, deaf to the prophetic task, never criticizes the culture, soon meets competition from tent and storefront churches which happen to remember what the Church has forgotten: that here we have no abiding city; that here we are but pilgrims and sojourners; and that this wondrous world of ours, say what we will, most certainly *is* going to come to an end.

The many ethically irresponsible cults existing today are the result of the Church's neglect of the prophetic and eschatological perspectives of the New Testament. Truth ignored always reasserts itself, but it may reassert itself in twisted manner. So also in this matter of spiritual healing.

Nothing could be more obvious, from a reading of the New

Testament, than that the Incarnate Lord healed the sick, and that He commissioned His disciples not only to go preach and baptize but also to heal. By and large, the Church neglected the healing aspects of Christ's Commission. And so it ought not to surprise us that this neglected aspect of Christian conviction, commitment, and commission has returned.

It has returned as Christian Science. It has returned in the dangerously appealing sects and cults. It has reasserted itself in a hundred obscure ways—where salutary Christian truth is all bound up with serious error.

No orthodox, catholic, Christian man or woman has the right to feel absolutely superior in the presence of these sects and cults. In great humility, he should recognize that the very existence of such sects and cults is, in part at least, the judgment of God upon the Church. Nevertheless, through no merit of his own, his membership in the Catholic Church of Christ enables him to discern that these cults are never purely the judgment of God. They exist, it is true, because the Church Catholic has been guilty of neglect—and we must be chastened by their existence and gratefully learn from them wherein the Church has sometimes failed to be the Church. But at the same time, the Churchman, thus aroused to penitence and renewed action, is uniquely situated to see how the cults and sects, though issuing to the Church a sharp and needed reminder, themselves go astray and would lead others astray.

The present book is not one with which every well-instructed Anglican need agree at every point. Yet every Anglican will, I believe, gladly welcome this book, for it seeks to recover for the Church—i.e., for sanity and salvation—a function which clearly appertains to the Church, a function which the Church, to her peril, all too often has neglected.

The book to which I would introduce you is well written and exciting. It sheds light on many places now dark for most of us.

It may well be that it will raise some questions that it does not seem to answer. With this result I shall be well content. The important thing is that the questions be raised and pondered.

The answers here offered will, in turn, propound new questions. These, for a relief, will be questions deeply propounded. For the book before us, written from the level of prolonged and personal involvement, and bearing with it the quiet authority of firsthand experience, precludes the superficial questions which all too easily come to mind.

HORACE W. B. DONEGAN
Bishop of New York

PREFACE

IN AT LEAST ONE SIGNIFICANT respect, the practice of spiritual healing is like greatness: some people painfully achieve the ministry of healing, whereas others have it thrust upon them. I had it thrust upon me.

When I was called to the rectorship of the Church of the Heavenly Rest in New York City, I came to a parish in which my predecessor had perceptively launched upon a pioneering venture in this mystery-filled field of spiritual health. With only blurred blueprints from the immediate past, and with few other guideposts to steer by, the Rev. Henry Darlington had successfully attempted to recapture some of that lost radiance which shines so brightly and steadily from the pages of the New Testament.

Not only is the record unblinkingly clear in terms of our Lord's own practice of healing the sick, but Dr. Darlington was unshakably haunted by Christ's quiet promise in the face of the disciples' helpless amazement at His miraculous acts: "*Greater things than these shall you do!*" And implicitly between the lines of every Gospel story, he sensed the presence of those words which Jesus put in the imperative mood: "Go forth, preach the Kingdom of God, and heal the sick."

But no two personalities are identical. Each man must bring his own peculiar endowments to the task at hand. In terms of the Biblical tale of the servants who had various talents entrusted to them, I felt that in the area of spiritual healing Dr. Darlington had been endowed with the gift of five talents,

whereas I found myself a one-talented servant—and that one talent apparently did not lie in the field of healing. But gifted or not, I was determined, God willing, not to emulate the unworthy servant by fearfully burying whatever talent had been entrusted to me. Furthermore, this pioneering ministry had become entirely too vital, locally and abroad, to be given the cavalier treatment of "take it or leave it." It could not be left. It had to be taken.

So, neophyte though I was, and terrified of the strange terrain which stretched mysteriously ahead, I nevertheless felt humbly obligated to put my hand to the plough and not turn back. Good seed had been sown and it was obviously my duty, no less than my privilege, to take over the faithful cultivation of this portion of a growing field.

Sometimes I tried ploughing in the exact footsteps of my predecessor. Sometimes I ran new furrows through untried acreage. And sometimes the soil became temporarily worn out and had to be ploughed under. But in the field of spiritual healing, it must be ultimately admitted that much of our cultivation is as yet by trial and error; and there are perhaps as many approaches, reactions, and techniques as there are individual practitioners of the art, lay and ministerial. The most that any forthright man can honestly say is, "This is my hard-won experience. This is my profound belief. And this is how I think it works."

In any event, no man has any moral right to be satisfied with anything less than the Christian goal of the late Dr. Trudeau of Saranac fame. "We are dedicated," he once said, "to a ministry which manages to heal sometimes, to relieve often, and to comfort always."

JOHN ELLIS LARGE

Essex, New York
July 25, 1958
Feast of St. James

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THE MINISTRY OF HEALING

I. KEEP AN OPEN MIND

ONCE UPON A TIME, IN THE first half of the twentieth century, the medical profession in the vicinity of Boston was warmed and illumined by the life and example of a practicing Christian named Dr. Richard Cabot. Probably no one will ever be able to estimate accurately how many young graduates and undergraduates, in and around Cambridge, had their lives truly galvanized by the pervading spirit of Richard Cabot; but certainly there are hundreds of us who, at one time or another, can recall the little doctor's quizzical tone and twinkling eyes as he asked the tantalizing question and then, after a breathless pause, gave the provocative answer.

"Gentlemen, would you like to know the cause of almost every illness?"

Even though the question was obviously rhetorical, and the pause after it was baited with the stuff of drama, it was almost irritating. It was like being asked if one would enjoy finding the Fountain of Youth which Ponce de Leon missed—or an easy key to physical fulfillment. When his answer came, it gave us as much pause as it did promise.

"It's the wear and tear of the soul upon the body!"

If you happen to be seeking a stimulating theme for a meditation, there it is. In an age wherein we have been sedulously taught that anything which is not physically measurable is therefore not physically in existence, something new may

hereby have been added—or, more accurately, may have been restored to its original place of consequence.

Because you and I live in an age of science, it is fitting and natural that we should become children of our age. But to become the *child* of science is a far cry from becoming the *slave* of science. And although scientists themselves are in no way to blame for the resultant confusion of values, the fact remains that we currently pay more attention to the outward house in which the inward spirit lives, than we do to the inward spirit itself. Millions of us have apparently forgotten that man is an irrevocable trinity of body, mind, and spirit—and that the greatest of these may indeed be spirit.

Consider, for example, Charles Lindbergh's comments on that great scientist of this generation, Alexis Carrel. "Carrel's mind flashed—with the speed of light in space—between the logical world of science and the mystical world of God. . . . Carrel's greatest interest lay in man. He used man as a path to God. He had confidence in the application of science to the life of modern man. This is the theme of his book, *Man, the Unknown.* But he was also aware of the fact that man is, in another sense, imprisoned by science. 'We must liberate man from the cosmos created by the genius of physicists and astronomers, that cosmos in which, since the Renaissance, he has been imprisoned. Despite its stupendous immensity, the world of matter is too narrow for him. . . . We know that we are not altogether comprised within its dimensions, that we extend somewhere else, outside the physical continuum. . . . In time, as in space, the individual stretches out beyond the frontiers of his body. . . . He also belongs to another world.'"[1]

When you find a Nobel Prize-winning scientist talking this way, you may begin to find room in your heart for a poet's words, as found in Tennyson's lines:

Speak to Him, thou, for He hears,
And Spirit with Spirit can meet—
Closer is He than breathing,
And nearer than hands and feet.[2]

Alexis Carrel was in no wise minimizing the discoveries of men of science in the world of God. He was merely suggesting that there is more to the human personality than that which meets the physical eye poring over a blueprint. No scientist ever *invents* anything. He simply—and sometimes not so simply—at long last *discovers* what had been placed there by God from the beginning.

The Creator had several choices. He could have created us vacuum-packed, carefully insulated against all evil, all temptations, all errors—and, therefore, against all growth into maturity. He could, in short, have conceived an Alice-in-Wonderland world, in which everybody who runs the race wins a prize. This arrangement would have had the easy virtue, which is no virtue at all, of the ivory tower, above the battle and far removed from the pedestrian grind of life's daily contests with the world, the flesh, and the devil.

Or He could have made us puppets, jerked back and forth on the string of His capricious whims, without regard for law and order. This is the kind of universe desired by those souls who, faced with a loved one jumping out of a twentieth-story window, would have God arbitrarily suspend the laws of His universe. The beloved individual would thereby be physically saved, but the dependability of the universe would also be thereby completely destroyed. And we have had enough of the unreliable already.

However, instead of the puppeteering or the vacuum-packed arrangement, our God made the great salute. In what He, in the light of His infinite wisdom, considered the fullness of time He momentarily became flesh. For a matter of thirty-three years

in all—and a matter of something between eighteen months and three years of a public ministry—the sheer *quality* of God was eternally revealed to mortal men, so that they might see what God was like; how much He loved them (even unto the power over death itself); and how He might also redeem them from their slavery to their prideful selves, here and now—if, in humility, they would permit Him to do so.

To give eternal meaning to the Incarnation, God has wittingly placed us at the heart of an unfinished creation. We are sharers in this creation, a creation which as yet is necessarily imperfect, since there can be no growth in sharing without recognition of the implicit imperfections which are constantly to be overcome.

We can choose to work with Him or against Him. The gift of free will provides a live option throughout the experiment. In short, we have the privilege of insisting—and no one will stop us, God least of all—that the thing which meets the eye is the only thing worth meeting, and that the *physically measurable* total is therefore the *whole* total.

It's a commonplace these days to remind ourselves that man is made up of a trinity. But we act as though we really meant that man is merely a duality of body and mind. We may tip our hat as a courtesy to the spirit, but we spend the vast majority of our time with the mind and the body. And therein lies our common tragedy.

We think of ourselves as smart in the ways of the scientific management of our brains and of our flesh, and smart we indeed may be. But it is our crowning stupidity that we brush off the one element of the trinity which alone gives fullest meaning and fulfillment to the other two. This matter of the spirit is admittedly a much more subtle business than the all too obvious body is. But it's always the subtleties in life which point the obvious factors to their rightful destiny.

A neglected or disaffected spirit can poison the body no less fatally than can a lethal dose of a corroding acid. And until we face the fact that man's spirit needs at least as much nourishment and attention as his body and brain do, we shall go on needlessly, like egregious fools, crippling and killling ourselves.

There is plainly nothing tangible about the spirit of God as it broods within, and hovers over, the human frame. Yet it is the tangible which is always transitory, and the intangible which is the abiding.

Dr. Russell G. MacRobert, an eminent New York physician specializing in psychiatry and neurology, has put the matter this way: "There is an area that is beyond the ken of the scientist—an extra-scientific realm. It can be called the spiritual world, the psychic universe or what not; but call it what you will, it is an area of the universe in which at present we can look for guidance only to poets, lovers, psychics, and seers. But it is real, possibly more real than the world about us which we can see and touch."

And even if you stop short of the realm of the spirit, confining yourself rather to the functions of the human mind, there is still evidence that the brain is by no means entirely dependent upon the conscious, physical organism. Speaking in his capacity as a neuropsychiatrist, Dr. MacRobert goes on to tell the story of a delicate operation performed by a colleague of his, a chief surgeon at New York's Lenox Hill Hospital. This scientific account reveals one of those out-of-the-body experiences which allows us to view the separateness of mind and body—to say nothing of spirit—as it exists within the framework of an individual personality.

"The operation on the ear," says Dr. MacRobert, "was to be brief but painful. The patient was a clergyman known to the surgeon as a sensitive person. The anesthetist was therefore instructed to have the patient deeply unconscious. With everybody prepared, the surgeon stepped up to start. He asked for a

special instrument. It had not been sterilized. Much annoyed, he cussed roundly, pulled off his sterile gloves and gown, left the room and went down a hall to where he had left an instrument bag with the type of instrument that he wanted. He brought it back, gave it to the nurse to be sterilized, and got back into fresh gown and gloves. After further delay he proceeded with the operation. All went well.

"However, the patient was so deeply comatose that for a time it looked as though he might not recover from the deep anesthesia. When he did recover, he related an unbelievable story. He reported that during the operation he was outside his body but in full possession of his senses and able to move about. He correctly reported actions and unusual remarks that had been made during the operation. Also, he had left the operating room with the surgeon, and gone with him down the hall when he procured the instrument from the bag. He described where at certain times the nurse had stood. Besides being correct about the conversations which had occurred, he jokingly chided the surgeon for having used language improper in the presence of a clergyman. The chagrin and astonishment of the doctors and nurses at his story were extreme. The patient reported correctly, proved his awareness of the whole procedure, yet was known to have been deeply unconscious. While this does not prove any particular thesis, such as reincarnation or even survival after death, it does suggest that mind and memory exist apart from the physical body. If this be so, we are led into a field where orthodox science is helpless to guide us. . . ."

The perceptive reader will have noted that this report from the records of a highly competent scientist in no way disqualifies the scientific approach to life, nor does it cast aspersions upon the context within which scientists fittingly operate. It simply notes that there is more to life—perhaps infinitely more

—than meets the material eye or the microscope in the shining laboratory.

By the same token, it is grossly unfair to assume categorically that a miracle is an action which contravenes the order and law of the universe. It is significantly more reasonable to conclude that an event which upsets the expectancies of our neat little calculation may well be a lawful and orderly act of which we, with our limited knowledge, are as yet unaware. Because spiritual phenomena are often mysterious in their operations, it does not follow that they are therefore necessarily lawless.

As a matter of fact, it is quite the opposite which is more likely to be true. The abiding imponderables do not give up their secrets easily or casually to those who, having no time for other than pat conclusions, attempt to read as they run. According to the universally accepted precepts of the fifteenth century, the world was categorically flat—until a man named Christopher Columbus launched out into the deep. It took nothing short of such an act of faith to indicate that the final truth might lie somewhere else than where a prior acceptance had placed it.

So it is neither a by-passing of science, nor yet a criticism of science, to come with an open mind to the investigation of phenomena about which science is still ignorant, or which may lie forever outside the competence of the scientific approach. As more than one scientist has pointed out, it is a mistake to deny anything on the basis of laws which are themselves as yet scarcely understood.

Proof of the miraculous does not presuppose a collapse of old laws, but rather the operation of additional parts of the same old laws, *newly discovered.* It is patently not in the character of the Creator, as consistently revealed within the pages of the New Testament, ever to suspend the laws of His own creation. He doesn't suspend them. It is simply that He chooses, upon

fitting occasions, to employ portions of the Law of His orderly universe, of whose operations we as yet know little or nothing. As sharers in the completion of this still imperfect creation, we are constantly narrowing the gap between the known and the unknown. The lamp of knowledge burns ever brighter. But we continue, at the present hour, to fumble feebly through vast precincts of dark ignorance.

Says Dr. Carrel, in his *Journey to Lourdes,* "We still know almost nothing about the laws of nature and we are in constant danger, like primitive man, of thinking that the rumble of the thunder in the clouds is a manifestation of divine anger. . . . To say that something is not true without having first investigated the facts is to commit a grave scientific error. . . . Many people refuse to accept anything produced by the interplay of natural forces unless it fits in with facts long since established, described in books, and categorized more or less artificially within the scope of known theories. When a phenomenon too revolutionary to be fitted into the over-rigid framework of official science suddenly occurs, people deny it, or simply greet it with a smile. . . . An event or a fact is called supernatural when its cause is not known. . . . As Claude Bernard has said, we must try to break the fetters of philosophical and scientific systems as we would break the chains of intellectual slavery.

"The laws of nature," he concludes, "are still so thickly veiled in darkness, as far as we are concerned, that to limit our scope of investigation to the laws we now understand would mean a wilful narrowing of our horizons. . . . No research should be abandoned just because it presents difficulties, or because it is neglected or scorned by the learned men of the time."[3]

The "man from Missouri," who compulsively washes his hands of everything which can't be materially demonstrated via blueprints and calipers, indeed has his own reward, but it does not include the joy of an open mind.

This openness of mind is a kind of least common denomi-

nator, especially when a man comes to grips with the puzzling art of spiritual healing. It's what Leslie Weatherhead had in mind when, in his monumental *Psychology, Religion, and Healing,* he noted that in our closing of those doors through which healing truth might come—merely because of our own prejudices and incredulity—we are being grossly unfair to both science and religion. And what is of more immediate moment, we thereby may be causing sufferers to remain needlessly in pain.[4]

A man has the right to the prejudice of a closed mind, one way or the other, as far as his enjoyment of Brussels sprouts or broccoli is concerned, since this is simply a matter of his personal response to the taste buds in his own mouth. But if this world is—even by the tenuous thread of remote possibility—*God's* world, and if we are therefore stewards of His mysteries and channels of His grace, then a closed mind is a wilfully sinful mind. This conclusion becomes doubly applicable when you realize that, in those subtle areas where it matters most, God in His infinite wisdom often employs the least likely persons in the least likely ways.

Whatever else it may be, the story of Alcoholics Anonymous, for example, is the story of how God was finally enabled to use what had been in many cases the castaway flotsam and jetsam of life, and how these bedeviled misfits were themselves enabled to help rehabilitate the lives of fellow derelicts in such a fashion as the astonished world had never seen before.

With God, all things are possible. It is only the sin of our inordinate pride which presumes to limit His love and the ways in which circumstances lead Him to demonstrate the powers of that love. It is within God's province and power to use even the self-confessed agnostic. But let the agnostic be certain that he is still honestly seeking the truth, come whence it may and cost what it will. No man, nor yet any branch of God's Church, has a corner on the Holy Spirit. "The wind bloweth where it

listeth, and thou hearest the sound thereof, but canst not tell whence it cometh, and whither it goeth: so is every one that is born of the Spirit."

Nicodemus, to whom this observation was addressed by Jesus almost two thousand years ago, was reluctant to believe anything not easily discernible by the five senses. As far as the Gospel according to St. John is concerned, this Pharisaical ruler of the Jews was the original New Testament skeptic. When Jesus talked about rebirth, Nicodemus could not get beyond the concept of the physical womb. He wanted gifts of the spirit, but he sought them solely by channels of the flesh. This is why, when the Pharisee protested that an old man could not enter a second time into his mother's womb, Jesus quietly answered, "That which is born of the flesh is flesh; and that which is born of the Spirit is spirit. . . . If I have told you earthly things, and ye believe not, how shall ye believe, if I tell you of heavenly things?"

Let this central observation from the lips of Christ, along with His final question, serve as the general text for those who, like Nicodemus and all others "from Missouri," demand to be shown.

The chapters which follow are dedicated to the demonstration of the effect of the spirit upon the flesh, as well as upon that mind which tantalizingly eludes anatomical identification. If our descriptions of the ways of the Spirit tend to offend your mind, please remember that not all things in life are sweetly reasonable, and that reason, like flesh, has its own strict limitations. And if these same delineations of spiritual phenomena irritate your *scientific* spirit, we beg of you, in the name of the Creator, to keep an open mind.

For, to paraphrase Shakespeare, there are more things wrought by a prayerful spirit than this world dreams of.

II. LAUNCH OUT INTO THE DEEP

THE PATIENT AND OBJECTIVE investigations of openly inquiring minds have long revealed the presence of observable and verifiable healings of a religious nature, especially within the framework of the Christian tradition. For example, the painstaking investigations of the *Bureau des Constatations Medicales* at Lourdes afford ample proof that spiritually-induced cures, even among those declared medically hopeless, are taking place in this very day and age.

This fact is a scientific one, provable beyond any doubt or cavil. The medical board at the shrine of Lourdes is admittedly not the only one possessing this laboratory evidence. But by the very nature of the pilgrimages which converge upon Bernadette's grotto, the professional reputation of these Lourdes physicians is sharply at stake. No cure may be certified if there be even a remote possibility that autosuggestion, hysteria, or any other purely psychosomatic condition might have been present.

As a matter of fact, it is this latter possibility which is always in the forefront of the bureau's collective mind whenever a case of alleged healing comes up for exhaustive examination. The danger of confusing the emotional with the spiritual is the one which, first of all, results in the doctors' being almost fantastically critical and conservative. And rightly so. The problem of

fraud at Lourdes is obviously not an appreciable one. But the problem of an honest mistake is. If a man is cured of a serious sickness by means of psychosomatic medicine, well and good—and praise be to psychology and psychiatry. But let's not call it spiritual healing.

Our widening insights into the two-way interactions between the flesh and the emotions are providing psychosomatic medicine with an ever-broadening field for effective therapy. But this *Bureau des Constatations Medicales* long ago came to the realization that the thoroughly attested cures which occur at Lourdes and at similar centers of corporate devotion are much more dramatic—nay, melodramatic—in character than any healings which lie within the context of psychosomatic techniques.

Just as the chief goal of physical medicine is the healing of the body, so the immediate goal of psychosomatic medicine is the healing of the emotions—which, in turn, often leads to the healing of the body. But the ultimate goal of *spiritual* medicine (if one may use the term in the sense that "the Cross is the medicine of the world") is *the healing of the whole personality.* This kind of health includes the spirit, as well as the mind and the body.

Its springboard is the premise that the spirit, being immortal, is of infinitely greater value than sheer intellect or the outward framework of flesh and blood and bone. The tenant is of more value than the house he temporally inhabits. If the house, badly damaged by the storms of life, can be shored up and rebuilt, that is a consummation worth hoping and praying for. And Christians have always respected and enjoyed the body as the temple of the spirit. In the face of the ancient Greeks' disparagement of the flesh, the Church stoutly affirmed its value, climaxing this conviction about the body's worth in insisting upon the significance of Christ's resurrection from the dead.

But as the story of Dorian Gray shudderingly points out, there

is no beauty in a beautiful body, if that body be an empty shell. From the standpoint of spiritual healing, it is simply a matter of putting first things first. A muscular body, framing a crippled soul, is hardly a thing of great moment. Lennie, in John Steinbeck's *Of Mice and Men,* had a physique of which Bernarr MacFadden would have been proud. But poor Lennie was emotionally an infant and spiritually a puppy.

This, parenthetically, is why healing via the spirit is so often and in so many places in ill repute. The tragedy is not that a lunatic fringe loudly espouses it, in terms of witchcraft and black magic. The tragedy is not even that crafty self-seekers use some of its techniques to play cruelly upon the emotions of suggestible people, especially those easily given to hysterical behavior. For the most part, the public soon learns to separate the sheep from the goats. The tragic situation involves those completely honest and well-intentioned souls who, practicing in the field of spiritual healing, insist that it is nothing less than God's will that all pain and sickness shall be done away with, once and for all; and that they act upon Christ's behalf when they are satisfied with nothing less than making every creature physically whole.

It is sad enough to see such people blindly shutting their eyes to the facts of Christian theology. It is even sadder to contemplate the effect that their teachings probably have upon those trusting souls who come for physical healings and are heartbrokenly disappointed; for that is the hour in which such a soul may be led to feel either that God is a mocker who does not keep His solemn promises, or that the unhealed man was himself *unworthy* of physical well-being.

What this brand of spiritual healer blithely overlooks is that Jesus Himself did not automatically heal everybody. This is not to say that He *couldn't.* With God all things are possible, and Jesus was God in the flesh. But the fact remains that He *didn't.*

And one suspects that the reason why He didn't was that He, above all others, was certainly putting first things first.

He was not the Chief Inspector of the Department of Sanitation. Christ's primary point in becoming incarnate was not to make men *well,* but to make them *whole.* Becoming better is always more important than becoming well. However, if the entire personality grows better, that betterment may well be reflected in a man's becoming more resistant to the ills of the flesh. Only God knows how much outward sickness may be ultimately caused by inward disharmony. Therefore, as we keep things in their proper order of value, we are bound to note that purely fleshly health is nothing more than a happy by-product of that search for a totality of health of which the flesh is only a small part.

It is this kind of reasoning which points to the centrality, in the Christian tradition, of that old-fashioned word "salvation." This ancient term means nothing more nor less than the achieving of wholeness or holiness—two ways of saying the same thing. These two words, in Greek as well as in English, were originally identical in meaning and sprang from the same roots.

It becomes increasingly clear, therefore, that no attempt at spiritual healing is a complete attempt if, while seeking exterior well-being, it neglects the well-being of the interior. A prayer in the Christian tradition is a prayer which forgets neither, and which fervently seeks both. This book, for example, is patently dedicated to humble investigation of the kind of healing which, starting with man's immortal spirit, goes on to include the well-being of both his emotional and physical life; and a later section is devoted entirely to the stories of certain individuals whose cures—mysterious and medically inexplicable—stemmed from the healing touch of the Holy Spirit. But it must be repeated that, when both interior and exterior health cannot be

achieved simultaneously, then the inner betterment is, by the very nature of our religious premise, to be preferred. Meanwhile, both the inner and the outer remain side by side in our most heartfelt petitions.

So it is that, although the records of every authentic healer are generously peppered with examples of truly remarkable cures of a bodily nature, it must be continually reiterated that a definitively spiritual cure, in contradistinction to a cure by surgery or drugs, should always reflect an inward change, whether or not that kind of change is accompanied by an outer one also. While the outward blessing is satisfyingly dramatic, the interior blessing is dramatically satisfying.

The tortured man who came to a series of our healing services, hoping as a last resort to find permanent relief from the ulcers which gnawed at his vitals, turned out to be the sort of person who feels that every man's hand is raised against him. Suspicious to an almost fantastic degree, he was forever on his guard against the world, the flesh, and the devil—but his own worst devil was himself. He resented the disciplines of marriage; therefore he resented the wife who represented those disciplines. He felt that love had tricked him into fatherhood; therefore his three children were one more source of resentment. The miracle is that the man was not physically handicapped by anything worse than ulcers.

This is not the moment to tell the story of our many counselings together, and of the painfully long journey which finally brought him to the haven of inner sanity. Suffice it to say that when love drove out fear, and when an almost psychotic suspicion was replaced by mutual trust within the context of the sacramental life, a man was literally reborn. But the interesting point of the story is this: our ministry of healing had no apparent effect upon his ulcers. At least there are no signs as yet. It has been several years since he first came reluctantly to that

initial series of healing services and then, in the course of counseling, made his confession of the demons which had made him a slave to his basest self. Now his home, instead of being a gladiatorial arena, is a haven of peace and of mutual compassion and patience. Whereas he himself had been the all too visible tyrant in the home, venting upon his bewildered family his displeasure with the world, God is now the unseen Guest brooding over the household, because He now has room to dwell in this man's heart.

Finally, I shall always cherish the privilege I had of sitting daily by the bedside of a man who was dying of cancer of the bloodstream—and who knew it. When, in the course of a routine physical checkup, a careful rechecking had been ordered on his blood test, Bob became suspicious. The physicians and laboratory technicians tried to allay these suspicions with well-intentioned double-talk. But the more they tried to brush him off, the more insistent he became.

"Look," he said gently, "I'm neither a terror-stricken child nor an addled and fluttery old woman. I'm not afraid to face death. No one loves this life more than I do. I've enjoyed every minute of it so far, and I'd be grateful for the privilege of crowding all I could of it into whatever may be left of my three score and ten."

He inhaled deeply on his cigarette and then, sitting bolt upright in the hospital bed, said in a level tone, "But, gentlemen, please don't forget one thing. This is no academic matter. This is my life you're talking about. And more than at any other moment in life, this is the one which demands uncompromising honesty—at least as far as I'm concerned, and I'm the one who *is* concerned. If you've made a diagnosis, I want what it says, straight from the shoulder. I want it unblinkingly and with no shilly-shallying. I've tried never to kid myself, and I don't want anybody else to start kidding me now."

The doctors were reluctant to comply with Bob's blunt request. Every physician understandably shudders when he thinks of the number of sick people who, when they hear bad news about themselves, either needlessly lose the will to live or, in an hour of mad panic, commit suicide. But this man had given unmistakable evidence of being well endowed with inner resources. Furthermore, he was flatly insistent.

As soon as the blow had fallen, Bob telephoned me and I went immediately to the hospital. Then began an experience stimulating to the ministry of any priest. It was the profound privilege of ministering daily to a Christian who, having lived well, had quickly learned how to die well. I was coming ostensibly to bring strength to him, but it was he who brought strength to me. He had not told me over the phone anything about the nature of his illness. In fact, when I had last seen him on the street only a few days earlier, he had represented the picture of robust health. So when, without fuss or feathers, he calmly told me that he was dying of leukemia—and in just those brief words—I suppose I looked a trifle taken aback, for he grinned at me and his eyes held a look of reproach.

"You're the last man who should look flabbergasted," said he, "when a guy tells you he's about to launch out onto the longest and most exciting journey a human being can enjoy. Dammit, if I can't face the fact of imminent death now, then the time I spent with God all these years has been wasted!"

"You win," I said. "There are no signs of wasted time anywhere in this picture."

"Furthermore," he went on, "the statistics indicate that ten out of ten are slated to cross the threshold. And no man can call his shots as to when the big move's going to be made. I'm just fifty-two, and I'd certainly appreciate anything you and the doctors can do to add a few more years to that sum total. But meanwhile, I've got my Prayer Book, my Bible, and the life

of the Church. And I've had more love than it's given most men to have. So whether he goes late or soon, what more could a man have—especially when he can take all that love with him?"

It's easy to minister to a grateful heart. Every hour we spent together was an hour happily engaged in exploring the differences between the transitory and the abiding. Each hour held the promise of Easter. As he had often packed, full of expectation, for an *earthly* journey, so now Bob discussed what should be included (and what discarded) in terms of a *heavenly* one. Time and again, he had set out excitedly on brief adventures into new fields. Now he was launching out upon the most exciting adventure of all. The mortal was calling out to the immortal, and the hospital room was filled with the presence of the eternal.

As some men, under other conditions, might go over a racing sheet together or carefully scan the stock market quotations, so we found it fitting to weigh, quietly and without undue emotion, the Burial Office from the Book of Common Prayer. This was the book which always remained just a hand's length away on Bob's bedside table. He was particularly fond of the trumpet-like notes of triumph which echo from the opening words of that classic burial service:

> I am the resurrection and the life, saith the Lord: he that believeth in me, though he were dead, yet shall he live: and whosoever liveth and believeth in me, shall never die.
>
> I know that my redeemer liveth, and that he shall stand at the latter day upon the earth: and though this body be destroyed, yet shall I see God: whom I shall see for myself, and mine eyes shall behold, and not as a stranger.

And he frequently meditated thoughtfully upon a favorite prayer from the Visitation of the Sick:

O God, whose days are without end, and whose mercies cannot be numbered; Make us, we beseech thee, deeply sensible of the shortness and uncertainty of human life; and let thy Holy Spirit lead us in holiness and righteousness, all our days: that, when we shall have served thee in our generation, we may be gathered unto our fathers, having the testimony of a good conscience; in the communion of the Catholic Church; in the confidence of a certain faith; in the comfort of a reasonable, religious, and holy hope; in favour with thee our God, and in perfect charity with the world. All which we ask through Jesus Christ our Lord. *Amen.*

Above all, perhaps, he loved to hear the comfortable words of the fourteenth chapter of the Gospel according to St. John:

Jesus said, Let not your heart be troubled: ye believe in God, believe also in me. In my Father's house are many mansions: if it were not so, I would have told you. I go to prepare a place for you. And if I go and prepare a place for you, I will come again, and receive you unto myself; that where I am, there ye may be also.

Throughout these visitations, it is well to remember that we kept both the inner and the outer petitions held up in our daily thoughts, as well as in our daily prayers. With understandable humanity, Bob had frankly confessed his desire for as many healthy years as possible upon this level of life. But in the same breath he expressed his belief that this life was far from being all of life. He came to have an unwavering conviction that what he missed here, he would more richly pick up there. Before he died, he had learned that the word "here" is only a fragment of the word "hereafter." Both were lovable and both were desirable. The good which could be had here was eminently worth preserving, but not at the cost of the hereafter.

So each day, at some time in the course of my visit, I would take one of Bob's hands in mine, and place my other hand on

his head, making the sign of the Cross on his forehead with my thumb, and at the same time repeating the prayer from the Visitation of the Sick:

> I lay my hand upon thee, In the Name of the Father, and of the Son, and of the Holy Ghost; beseeching the mercy of our Lord Jesus Christ, that all thy pain and sickness of body being put to flight, the blessing of health may be restored unto thee. Amen.

"Nevertheless, Father, not my will, but Thine, be done." It is both our duty and our privilege, as stewards of God's mysteries, to do the very best that it lies within us to do, and then to leave the rest in His hands. As Bob had put it, "The statistics say that ten out of ten are bound to die, and no man can call his shots."

Therefore, although we never ceased to use the petition printed above, we did not fail to add the following prayer, during those latter days when the earthly end seemed to be nearing:

> O Father of mercies, and God of all comfort, look graciously upon this thy servant, Robert, here lying in great weakness of body; and the more the outward man decayeth, we beseech thee to strengthen him so much the more in the inner man; through thy Son, our Lord and Saviour. Amen.

As somebody once pointed out, we all have to die, but we don't have to die sick. Not, at least, sick at heart. Physical healing was apparently not for Bob. He died in a matter of weeks after learning the nature of his fatal disease. But those weeks were weeks of spiritual growth in seven-league boots. He had come into the hospital sufficiently mature in spirit to take bad news with Christian hope. By the time he had left the earthly house which his spirit could no longer inhabit, he had matured even more notably in inward stature. He rose in quiet triumph

over many of the rest of us, as a giant inevitably rises above pygmies. Who then shall presume to say that a healing had not taken place there in that hospital room, and a healing, furthermore, beyond all earthly measuring?

So, although subsequent sections of this book will be dealing with remarkable examples of physical restorations via the medium of spiritual healing, let no man treat lightly the achievements of this man stricken, then dying, and finally dead. For the serenity which peacefully pierced the veil for Bob is the same spirit of radiance which the Creator stands ready to pour out upon each of Bob's fellows, be they sick or well.

III. CAST YOUR NET ON THE OTHER SIDE

SINCE, FOR CENTURIES, WE have tended to think of both the cause and the cure of sickness in terms of material things, it is perfectly natural—not at all necessarily supernatural—for healing within a religious context to cast its net on the other side of the waters of life.

Spiritual cures, quite apart from any connection with physical medicine, have certain marked characteristics. These identifying factors are almost invariably present, to one degree or another, in all accounts involving non-material techniques whose outcome is measurable in terms of material cures. We are now concerned, therefore, with healings which are applied by way of man's soul, but which have measurably good effects upon his body.

In this connection, our first concern is not to presume to ask *why* the Holy Spirit has chosen to act in this fashion. We must rather begin by noting *how* He so clearly manifests Himself in this vital area of life. Cyril Richardson, professor of Church History at Union Seminary in New York, has made an objective study of the factors marking this phenomenon of cures by means of the Spirit of God acting upon man.

In a symposium edited by Simon Doniger and entitled *Healing: Human and Divine,* Dr. Richardson writes: "Spiritual cures

have certain marked characteristics which tend to recur in all the accounts, be they the records of Epidauros or of Lourdes. [That is, be they the recorded experiences of pre-Christian days or of this morning's newspaper—Author.] There is often a sudden acute pain which is directly related to the cure. There is the lack of a time factor. The healing is sudden, with no intervening period of convalescence. There is permanence. There is an ambiguous relation between faith and doubt, though faith in some form (of the patient, or the healer, or the Church) is invariably present. There is a general atmosphere of religious expectation. And finally, such cures are remarkably infrequent. About one per cent (or less) of the pilgrims to Lourdes receive bodily healing."[1]

Now, since Dr. Richardson has presented us with six classical characteristics of spiritually induced cures within the narrow confines of one paragraph—and since each of the six is eminently worth noting individually—let's begin by listing them singly, so that each may make its proper impression, even upon the man who runs as he reads.

(1) There is often a sudden acute pain which is directly related to the cure.

(2) There is the lack of a time factor. The healing is sudden, with no intervening period of convalescence.

(3) There is permanence.

(4) There is an ambiguous relation between faith and doubt, though faith in some form (of the patient, or the healer, or the Church) is invariably present.

(5) There is a general atmosphere of religious expectation.

(6) And finally, such cures are remarkably infrequent.

The representative reader, seizing upon these six classical marks of spiritual healing across the centuries, will check them off, one after the other, with a feeling of increasing hope—until he comes to the last point. For if this sixth characteristic is true,

it would seem to render the first five points as of scarcely more than academic interest. It's like starting to hand the condemned man a pardon, and then suddenly deciding to hang him anyway.

At this juncture of our search into this fascinating subject, it therefore becomes a matter of vital importance to wrestle with this established fact of rarity before moving a step farther. Unless we can unearth at least some of the stumbling-blocks which may be standing in the way of more frequent healings, and set about trying to remove them, we are simply engaged in a pathetically wistful examination of what might be but generally isn't. That, for the purposes of this book, is a sleeveless errand indeed.

To begin with, there is a kind of preventive medicine applicable to the soul of man, no less than to his body or to his emotions. If, in the course of reading this book thus far, it begins to dawn upon you that the ideal of spiritual health is one which suggests that the soul shall be in creative rapport with God, so that no unfaced imbalance anywhere in the psyche will be passed on to the body in the form of physical disease, you may then be moved to deal with your corroding resentments, for example, constructively.

A later chapter deals with the techniques of this kind of preventive medicine. Suffice it to say at this point that, if you learn to handle the evils which poison your soul *now,* you won't have to resort to spiritual healing when these poisons have been unwittingly foisted off upon your body *later.* If the gnawing demons are properly exorcised in the present, you may never have to resort to the counseling services either of priest or doctor in the future.

God only knows how many people, trembling on the edge of a serious bodily sickness (*not necessarily the body's fault*) have availed themselves of the Holy Spirit's healing in time to preclude their having to be examined by physicians at Lourdes

or anywhere else. Such healings are not rare, though they obviously, by virtue of their preventive nature, can never be recorded in the annals of miraculous cures. But just as preventive medicine is perhaps the most vital branch of medical science today, so perhaps is that preventive action of the soul, which eliminates the inward poisons before they are driven to take the shape of outward sickness.

Meanwhile, in cases where the disease—whatever its original source—has patently attacked the flesh, the scientific proofs of medically inexplicable cures are readily available. And, it must be reiterated, they are admittedly infrequent. A possible explanation, in part at least, for this comparative rarity of miraculous healings may be the result of the aforementioned narrowness of the conditions under which an allegedly miraculous cure will be allowed, for instance by the medical examiners at Lourdes. Nowhere in the entire world are more cures sought for than at this shrine city. And nowhere are the claimed healings medically scrutinized and checked and rechecked more carefully or with more scientific conservatism than here.

This strictness is most commendable, and I'd be the last to suggest that the professional integrity of the highly qualified examiners be in any way endangered, or the reality of the attested miracles in any way dimmed, by even a microscopic relaxing of these scientific standards of medical judgment.

But at the same time, it is only fair to face the possibility that many genuine cures must therefore, for one reason or another, be regrettably forced to go unrecognized and unadmitted. To this end, consider the minimum basic requirements of this *Bureau des Constatations Medicales.*

As a prelude to all other considerations, it is required that the disease shall prove itself to be unquestionably organic in character. This predication is insisted upon, in a commendable effort to be certain that hysterically-induced sicknesses shall be

firmly ruled out. Then, when this preliminary condition has been satisfied, the normal time factor in the process of healing must have been notably shortened. The next requisite is that the patient shall never again suffer a relapse. The clinical features of the disease, obviously present before the cure, must in no wise be at all in evidence thereafter. Finally, the cured person must return to be medically checked and rechecked.

This extreme carefulness, bordering on scrupulosity, is medically understandable. Having cordially admitted this fact, it is yet permissible to go on to quote Christ's words, "By their fruits shall ye know them." A man whose total blindness has apparently been caused by a condition involving hysteria is surely no less sightless than is the victim into whose face a vial of corrosive acid has been hurled. If, in the case of the hysterical blindness, a spiritual experience can blessedly achieve what a medical experience has failed to achieve, that fact deserves to be made known. Science may be unable to explain how blindness can be hysterically induced, or how restoration of sight can be spiritually induced. But the truth remains that the man who was blind is now able to see. The eating of the pudding is still the best proof of the pudding's character.

This situation inevitably reminds one of the blind man to whom Jesus restored sight. As the story is related in the ninth chapter of St. John, Jesus saw the man, blinded from birth, as He passed along the road. Then, says the Gospel,

> . . . He spat on the ground, and made clay of the spittle, and he anointed the eyes of the blind man with the clay,
>
> And said unto him, Go, wash in the pool of Siloam. . . . He went his way therefore, and washed, and came seeing.
>
> The neighours . . . said unto him, How were thine eyes opened?
>
> He answered and said, A man that is called Jesus made clay and anointed mine eyes, and said unto me, Go to the pool of Siloam, and wash: and I went and washed, and I received sight. . . .

Then again called they the man that was blind, and said unto him, Give God the praise: we know that this man is a sinner.

He answered and said, Whether he be a sinner or no, I know not: *one thing I know, that, whereas I was blind, now I see.*

We know nothing whatsoever about the origin of that man's blindness. We know equally little about the spit and the clay and the water of the pool of Siloam. All we do know is that all of them were intimately involved in our Lord's actions and commands. And all that the man knew was little enough. "I don't know what he did or how it happened. All I do know is that whereas I was blind, now I can see!" That, for him, was surely enough.

Christopher Woodard, a well-known London physician, writing in his stimulating book, *A Doctor Heals By Faith,* registers his own regret that the medical bureau feels impelled to demand the removal of all clinical evidence of disease after an alleged cure. "Although only in Lourdes a short time," he writes, "I saw a most dramatic instance of this particular rule being enforced. Three years ago a woman had visited Lourdes with a completely fixed spine and suffering from advanced ankylosing spondylitis of the spine. Suddenly, while praying at the Grotto, her back became completely mobile and she was able to move it normally. She was taken to the Bureau de Médecine and they X-rayed it again. It was more than fascinating for me to see the whole medical record of this case and the woman herself. A claim to have the case accepted as a first-class miracle was turned down because the X rays, after the incident at the Grotto, still continued to show advanced disease in the spine. Yet what was there to explain the fact—which I saw with my own eyes—that she could bend down and pick up anything off the floor without the slightest pain or difficulty? It is all very well to say that for the reputation of Lourdes such a case cannot be accepted as a miracle, but science has no explanation as yet of how she was able to do it."[2]

And, like the erstwhile blind man in the New Testament story, I'm sure that this particular woman, acting as flexibly as any normally healthy human being, couldn't care less that her remarkable cure was baffling and totally inexplicable to the X ray in the laboratory. The scientific experts had X-ray proof, over and over again, that her spine was still in the grip of a rigid calcification. The carefully checked reports of the technicians said that her back was totally rigid, but she said, "All I know is that, praise God, I can bend again." And she did.

Ironically enough, records of apparently miraculous cures are sometimes declared invalid for quite the opposite reason. That is, a series of X rays will indicate the presence of a malignant condition. Two or three days later, without the intervention of either drugs or surgery, a subsequent series of X rays will indicate the complete absence of malignancy in the very spot where it had loomed up so threateningly only forty-eight hours earlier. But—understandably enough, perhaps—neither the physician nor the surgeon was willing to be pinned down on the matter.

I am thinking, in this connection, of a case recently uncovered by a dedicated group of practical Christians who had painstakingly created a commission for the objective study of spiritual healing. This commission employs a professionally trained reporter whose task it is to investigate the authenticity of as many cases of alleged cures as possible. However real such cures may be—or however remarkable they may seem to be—no case will be accepted for the commission's files without photostatic copies of the patients' medical records, along with the co-operating physicians' attestation that these specific cases of healings are medically inexplicable and that they point to non-material interventions of one sort or another.

In the particular case now being referred to, the patient had gone to his company's department of industrial medicine for a

routine physical checkup, in the course of which the X rays revealed what unquestionably looked to be a malignancy of the lung. To lessen the possibility that an error had been made, additional X rays were taken; they confirmed the diagnosis. The patient, Gene, was promptly sent to the hospital, where still more tests were taken, providing even further corroboration of the original diagnosis. Gene was told that a spot of infection had attacked one of his lungs and that an immediate operation was deemed mandatory.

Gene was hospitalized on a Saturday, in preparation for major surgery early Monday morning. As soon as he had heard the unhappy news, Gene called his pastor, who, after administering the sacramental rites of the Church, had notified the parochial prayer group of their friend's critical situation. This particular prayer group was one of those efficient cells which sees to it that petitions are offered up to God around the clock and by name. Because of the urgency of his need, Gene's name was placed at the head of the list, both in the duration of the prayers and in the frequency with which they were being offered. Members of the group with sufficient time and self-discipline would enter the church and remain kneeling in steady prayer for as much as a half hour. Businessmen at their desks would break long enough into the concerns of the day to remember Gene and his great need of the healing touch of Christ. A letter carrier pounding the pavements, and a truck driver on his rounds, would keep Gene in their petitions at specific intervals in the morning or afternoon. And in the small hours of the dark, people like a night watchman, a milkman, and the short-order cook in an all-night diner, would be regularly holding Gene up in their prayers, simple or involved, short or long. The point is that throughout every single hour of the twenty-four, this man was being prayed for.

These 'round-the-clock petitions, you will remember, had been

launched on a Saturday. Scarcely had one full twenty-four-hour period passed, when suddenly Gene sensed a marked difference in the way he felt. Where there had been a depressing feeling of foreboding, there was now a lightness of spirit. Where there had been increasing tension, there was now the relief of relaxation. Moreover, it was as though an actual burden had been lifted from his chest. These symptoms, of course, could simply have been the result of a sudden infusion of the Holy Spirit. But at the same time, perhaps a literal load *had* been lifted from his chest. It was a wild possibility, but Gene was a man of faith, and even the wildest of possibilities had no right to go unchecked.

With what must have been a sheepish air, Gene asked to see the doctor and told him the embarrassingly unscientific tale. Whatever he may have thought of the story, the physician was wise enough to let no stone go unturned, and gracious enough to acquiesce to Gene's whim that, in the light of this experience, additional X rays be taken.

These latest X rays, taken only a short time later than the last battery of photographs, were completely negative. They showed not the faintest trace of the apparent tumor which had loomed so large in all of the other plates just hours before. Nothing but normal tissue was revealed anywhere in the area examined. So, instead of being wheeled into the operating theatre on Monday morning, Gene was happily wheeled home, healthy as ever, in a taxi.

But when the investigating reporter came to check upon the remarkable story, the physicians were unwilling to admit that some phenomenon of a non-material character had evidently been in operation. Well knowing that medicine is an inexact science, they instead insisted upon the probability that the results of the tests to which the patient had been submitted had been misinterpreted. In all honesty they suggested that the X rays

may have been misread. Yet these were the very laboratory tests upon whose results a man had been scheduled to undergo major surgery—and upon whose results he was also sent home as a man without a trace of carcinoma of the lung!

One day in the spring of 1957, while waiting to deliver a lecture at Oxford University, I chanced to discuss this knotty problem with Dr. James Ritchie of London. Dr. Ritchie was by no manner of means being cynical, but he did insist that if research in the field of non-material healing were to wait upon the fullest and most cordial co-operation of physicians and surgeons everywhere, such research could never expect to launch very far out into the deep.

He was not being unduly critical of the medical profession when he spoke on this wise. It is simply that the scientist follows one discipline, and the theologian another. However good a Churchman he may be—and top-flight scientists tend to be deeply religious men—he is natively suspicious of any unscientific approach which may encroach upon the area of his special competence.

Therefore, says Ritchie, the moment that medical affirmation is sought by the healer for a cure apparently arrived at non-materially, the physician or surgeon feels scientifically justified in raising one or more of the following objections with a high degree of frequency. And he proffers his objections in all sincerity.

(1) Fraud, misrepresentation, or faulty observation may, knowingly or otherwise, be present in the allegations of the spiritual healer.

(2) Misdiagnosis may have occurred, either before or after the alleged cure took place.

(3) The progress of the disease itself may have mysteriously undergone a process of reversal, resulting in the phenomenon known as *spontaneous remission.*

(4) Hypnotic suggestion from without, or autosuggestion from within, may well account for the presumed onset or subsequent disappearance of the disease.

(5) In addition to the foregoing observations, it may be deemed necessary to exclude from consideration any cases in which there is evidence of coincident treatment.

(6) And finally, it is the better part of scientific discretion to throw out any case which has been under the care of a physician for whom there is inadequate documentation. (In the United States, this last objection might apply to a physician who was not currently a member in good standing of the American Medical Association.)

It must be repeated that Dr. Ritchie, himself a physician, was not, in the listing of these all-too-common objections, being unduly critical of his own profession. He was simply evincing an open-minded curiosity about those elusively non-material factors in life which, while not *of* the body, have an obvious bearing *upon* the body. A cure whose source is baffling to the paraphernalia of the laboratory is not necessarily any less of a cure just because its methodology lies beyond the current understanding of physical medicine. By the same token, no disease is necessarily any the less objectively real just because its goings and its comings elude analysis by test tube, microscope, or Bunsen burner.

Ritchie's objections to the *list* of objections included his rejection of the premise that what is unknown is thereby automatically unreliable. It therefore follows, in his considered opinion, that many valid cures of a non-physical nature have needlessly been rejected and thus have gone unrecorded. If this thesis be even remotely true, we then possess one more insight into the reason why spiritual healings seem to be more infrequent than perhaps they actually are.

Nevertheless, the aforementioned commission has continued

to reject the recording of any cure which does not have the stamp of qualified medical corroboration. An uncritical spirit may be a salutary thing for the vacationer relaxing at a summer resort. But the holiday mood is not the imperative mood, and it is imperative for those of us operating in the field of spiritual healing to avoid being seduced by easy enthusiasms. A defensive minority, intoxicated by improperly investigated successes, deludes only itself and a credulous audience.

The field of spiritual healing, like any other field dealing with phenomena as yet only partially known, is already peppered with charlatans, devotees of the lunatic fringe, and ruthless publicists who, for their own selfish gain, play craftily upon desperate hopes and fears of trusting souls in the hour of trouble. Virtues such as faith and love can never be caught within the confines of an X-ray plate or a pair of calipers. To demand proof of God before believing in Him is thereby to make a mockery of the very conditions upon which the relationship is based. If the technique of curing sicknesses by non-material means is ever to take its objectively recognized and respected place in twentieth-century society, it must be with the knowledge and co-operation of the medical profession. Only then shall we be on sufficiently firm ground in seeking to narrow the gap between the known and the as yet unknown in that tantalizing trinity of body, mind, and spirit called Man.

Therefore it is a source of profound gratitude to note that a ground-swell of mutual concern between medicine and religion is surging forward rapidly, gathering more and more unto itself. For instance, the roster of co-operating physicians, surgeons, and psychiatrists taking an active part in the spiritual healing seminars sponsored by the Laymen's Movement for a Christian World is a roster of some of the more eminently respected names in the files of the American Medical Association.

Before leaving the subject of this interrelationship between

careful medical practice and the apparent rarity of fleshly cures via the Holy Spirit, it is of signal importance to recall one of the basic demands of the investigating bureau at Lourdes, namely that of proved permanence of cure. This demand is obviously a fair one. A cripple who, in the temporary grip of religious ecstasy or hysteria, flings away his crutches—and then, an hour later, falls in a helpless heap—is patently still a cripple. A cure which is at best merely a momentary one is not even a reasonable facsimile of a cure. The visible healing of a woman dying of tubercular peritonitis must not lose its efficacy as soon as the attending physician's back is turned.

However, this is just the point at which a simple but regrettable problem injects itself into the picture of permanence. The dying patient, instantly healed, goes gratefully home and continues in excellent health, with never a day of relapse, until at long last a natural death overtakes her in old age. But the medical bureau never knows about it. Perhaps the wonderfully recovered patient is thoughtless or selfish or simply cannot afford the long journey back to the doctors again. In any case, and whatever the reason may be, she fails to follow the proviso that, if her case is to be recorded as a truly miraculous and non-medical healing, she must return at stated intervals for re-examination.

The apparition of the Blessed Virgin Mary appeared before the peasant girl, Bernadette, in 1858, and from that date the remarkable waters of the grotto have been the scene of remarkable cures. Who knows, in the more than one hundred years since, how many permanently healed people have, for one reason or another, failed to make the important pilgrimage of the spirit, the pilgrimage of thanksgiving to God, at which time they would submit themselves to a careful medical checkup? If we knew what this incalculable number was, might it not to some degree change the recorded infrequency of cures?

Finally, even if the cures themselves are infrequent, the hours which we spend in an honest search for increased cures should *not* be infrequent. The tragedy is not that the healings are still comparatively rare, but that many impatient people demand a peremptory all-or-nothing. It seems to be their conviction that if a certain God-given technique of healing doesn't heal everybody, then it can't be God-given. They apparently forget that we are all fumblingly incomplete creatures dwelling in a still unfinished creation. They also fail to remember that, as children of God, we are privileged to be sharers in the ultimate completion of that creation, and that it is our glory to seek to uncover the mysteries of life, here and there and one by one.

Never shall I forget an encounter I had, one day during the summer of 1956, while delivering a lecture on the ministry of healing at the University of Geneva. There, with the snow-capped peaks of Mont Blanc brooding over it, stood the Ecumenical Institute, to which selected young men and women from all over the western world were invited to come, provided that they were interested in the give-and-take of Christian unity, as well as in probing into the arcana of theology in general.

Halfway through my lecture, I paused to allow time for a question period. A German theolog, with typically Teutonic intentness and thoroughness, posed the blunt question, "Are you able to heal everybody you touch?"

"Good heavens, no," I replied. "I don't know of anybody—priest or doctor or lay healer—who can cure everybody."

With an impatient wave of the hand, accompanied by that irritating sureness which is the peculiar endowment of cocky youth, the German student said, "If spiritual healing is of God, it should be spiritual enough to heal all who are in need. Healing was an unmistakable mark of the New Testament and of the primitive Church. What have we done with it? The things

you talk about now are only a pale reflection of that earlier radiance. Therefore, I am through with it. If, as a minister, I could not heal *everybody,* I would not try to heal *anybody*!"

This all-or-nothing student of theology stands in need of memorizing a provocative little poem by Bonaro Overstreet:

> You say the little efforts that I make
> Will do no good: they never will prevail
> To tip the hovering scale
> Where justice hangs in balance.
> I don't think
> I ever thought they would.
>
> But I am prejudiced beyond debate
> In favor of my right to choose which side
> Shall feel the stubborn ounces of my weight.[3]

Every man who finds himself impressed by sheer size alone, and who feels that a small beginning is scarcely better than no beginning at all, will discover a salutary antidote in the heartfelt words of an Episcopal priest who himself has been the grateful recipient of a remarkable healing. Writing again in *Healing: Human and Divine,* Cyril Richardson says, ". . . we must not forget that spiritual healing, though rare, is *very real.* When it comes, it can come with a dramatic suddenness and spectacular character which far outdistance modern medicine. That is why *we must always provide the occasion for it.* Here ministers have often been most lax, either from disbelief or from ignorance. By prayer or unction, or with the help of the charismatic healer, we are in duty bound to set the stage, as it were, through which the Spirit of God *may* operate. It is God and not we who does the healing; but without our prayers and sacraments, the channels of his grace may be wanting. We must not raise false hopes; neither must we quench the Spirit. When right relations

with God are established through confession of sins and thanksgiving, who can say if the Spirit will not raise up the sick man? We wait on the Spirit of God, earnestly believing that he works with power. . . . The miracle may come through our unworthy hands, if we earnestly prepare for it, neither disbelieving nor being overanxious."[4]

IV. RISE, TAKE UP THY BED, AND WALK

HAVING TAKEN DUE NOTE of the classical marks which, across the centuries, have characterized true spiritual healings, and having been at considerable pains to point out several factors which could cause a sizeable change in the historical stand concerning the rarity of such cures, it is now time to move on to a special plea. History has faithfully recorded the signs which have almost invariably accompanied classical healings via the Spirit of God. It would be presumptuous of us to disagree with them or to attempt to change them. That's the way they happened, and that's why they were thus recorded.

However, it would be nothing less than a source of serious injustice to this growing field of healing, if we were to fail to take note of a considerable body of spiritual cures which are not *rare* because they are not *instantaneous*. In these interesting cases, the cures took a matter of hours or of days (and, in one instance, a year and a half) to be complete. In each case, spiritually induced forces had been put to work. And furthermore, the healing in each instance was spontaneous. That is, it had been found either that the medication was having an adverse effect upon the patient, or that the case had been deemed medically hopeless. Despite the fact that not any of these heal-

ings were instantaneous, they all have the right to be considered miraculous in character.

Before telling the stories of three among such cases, it is vitally important at this juncture in our investigation of the mysteries of the Spirit that we be certain of our understanding concerning the character of the miraculous. A miracle is not a feat of black magic. Nor is it an arbitrary interfering with the orderly operation of a lawful universe on the part of a capricious Deity. This point cannot be too often repeated or too emphatically emphasized.

As Richardson puts it, ". . . a miracle is not the changing of a predetermined course of nature by an arbitrary God. Rather is it the emergence of latent, creative powers within a religious context. . . . Not every spontaneous cure, therefore, is a miracle; but only those which are seen to disclose God; which awaken faith; and which reveal, rather than obscure, the Creator behind his works. Miracles are translucent of the Divine; for they direct the attention not to themselves, but beyond themselves to their Source. They have a 'natural' explanation, in the sense that they belong to the created order and follow its patterns. . . . What makes them miracles is not that they happen, but that they have the transparent quality of revealing God."[1]

Above all, perhaps, it is of therapeutic value to realize that a phenomenon can be "natural" and still be mysterious. To achieve this combination, it needs only to express the operation of a law in some area where our limited knowledge still finds us seeing through a glass darkly, instead of face to face.

Meanwhile, a most pertinent question arises to be posed at this point: Through what kind of agency are these cures channeled, and how do they come to pass? Well, two distinct types of spiritual healing are generally recognized. Like the classical kinds of spiritual healings themselves, the first type is, currently at least, comparatively rare. It is the kind of healing in which

the healer himself seems to carry much of the weight of the phenomenon taking place. That is to say, he patently possesses certain remarkable talents within the physical confines of his own personality. These endowments are psychic in character, but they reveal themselves in a physical fashion.

From the ancient Greeks, who recognized the possession of such peculiar talents in their midst, we inherit the word "charisma." Therefore, the possessor of this mystical *charisma* is an individual capable of practicing *charismatic* healing; that is, the act of curing wherein the healer himself apparently plays the primary part. This individualized power, as displayed by a specific person, does not necessarily imply the possession of a self-generated gift, unrelated to the God-given order of the universe. It more likely indicates the presence of a particular personality who, for one reason or another, is a more sensitive channel for the conduction of those manifestations of the psyche, or soul, which bemuse the naked eye and which elude even the scientific eye trained to the magnifying glass of the microscope.

This is the species of gift to which St. Paul was referring in the twelfth chapter of his first letter to the Corinthians:

> Now there are diversities of gifts, but the same Spirit.
>
> And there are differences of administrations, but the same Lord.
>
> And there are diversities of operations, but it is the same God which worketh all in all.
>
> But the manifestation of the Spirit is given to every man to profit withal.
>
> For to one is given by the Spirit the word of wisdom; to another the word of knowledge by the same Spirit;
>
> To another faith by the same Spirit; *to another the gifts of healing* by the same Spirit. . . .

In this generation, at least, such individuals operate *as* individuals. Occasionally, they ally themselves with the ministry of

healing in a specifically parochial connotation. But for the most part they quietly employ their mysterious talents in a self-contained fashion. Whether their literal gift of healing came early or late, they are often honestly puzzled as to the hour or manner of its coming. But of its reality, there is utterly no doubt.

In the city of Baltimore, for instance, there dwells a full-time industrial engineer in whom this charisma is obviously manifested. If he places his hand six inches above your shoulder, you may feel the radiation of a signal warmth emanating from his outstretched palm, as from the presence of a heating pad. Upon occasion, he has touched thumb and forefinger to the tumorous growth on a breast, and, in in a matter of hours—or less—the tumor has shriveled and disappeared. I have not personally observed his use of this particular form of therapy, but I have heard the sworn statements of men of unquestioned integrity and acute perception who *have* witnessed it. Examples of this sort of miracle could be added by the score.

Significantly enough, individuals like this Baltimore charismatic, unlike some of the self-aggrandizing publicists on radio and TV, are invariably shy people who go out of their way to avoid melodramatic publicity. They also tend to refuse to permit their mystical talents to earn their livelihoods for them. They humbly recognize that their gifts are not of their own making, but rather are talents to be employed in a kind of trusteeship, for which they are responsible to their Creator who so endowed them. Obliquely, if not directly, their muted response is somewhat reminiscent of Christ's oft-reiterated words, "Go, thou, and tell no man." They intuitively sense that to commercialize these talents is to run the awful risk of endangering their effectiveness.

As the immortal spirit of man is held in a frail vessel of blood and bone, so are these gifts. Treat them too lightly, or rip at

them ruthlessly to see what makes them tick, or use them for self-glory, and they disappear overnight as mysteriously as they came.

In Great Britain, where concern for this subject seems keener, and is perhaps somewhat farther advanced than it is in America, such organizations as the Church's Fellowship for Psychical Research and the Medical Society for similar research are natural breeding grounds for individuals who, to one degree or another, give evidence of possessing this charismatic gift. One man in particular evoked my own sharpest interest, for it was he with whose clinical work I was most closely associated, during that period in the spring of 1957 while lecturing in London and at Oxford.

Michael Ash, a Harley Street physician, carries on his medical practice *as* a physician, but also does it concurrently within the context of his Christian convictions. That is, he is not satisfied to practice his medical science as though physical medicine were an end in itself with nothing more to be said. Quite simply, he believes that the human personality breathes in the Holy Spirit as he breathes in the air around him. This conviction reminds one of the opening petition of the Holy Communion service in the Book of Common Prayer:

> Almighty God, unto whom all hearts are open, all desires known, and from whom no secrets are hid; Cleanse the thoughts of our hearts by the *inspiration* of thy Holy Spirit, that we may perfectly love thee, and worthily magnify thy holy Name; through Christ our Lord. Amen.

Now, Webster says that *inspiration* is, among other things, "a supernatural influence which qualifies men to receive and communicate divine truth." As for the verb form, the same dictionary says that to *inspire* is "to fill with or as with a supernatural power or energy."

Preliminary to his comments upon this breathed-in energy, as referred to both by the prayer and by Webster, Ash says, "Someone is ill, but gets well again. This happens any day and every day. But we all take this wonderful, natural faculty for granted, and only get excited and try to do something when it does *not* occur. What we do then is to find out what is preventing the healing process from occurring and to remove the hindrance.... Not only mechanical interference—such as a twisted bone or a thorn in the flesh—can interrupt the healing process. It can also be interrupted by disturbances in the mind. For example, unhealthy preoccupation with the process of digestion interferes with digesting. Healers find that the process of healing is sometimes held up as soon as the patient's attention is directed to what is going on. Hence *a religious background to the business is a help: it helps by distracting the patient's attention from his own body, and fixing it on the act of worship.*"

Parenthetically, it may understandably seem that an act of worship, engaged in for the purpose of distracting the patient's attention from a troublesome body, is an unworthy act of worship. But it must be noted that Ash predicates the religious background in the first place. The distraction is the happy by-product of a religiously attuned spirit. And even in those cases wherein the spiritual bent is fumblingly sought as a last resort, it must be remembered that with God all things are possible. Christ can use even the basest motives and, when His *inspiration* is not only "breathed in" but accepted and willingly used, can transmute those original motives into something ultimately noble. One need only recall His basic injunction: "Seek ye first the Kingdom of God . . . and all these things shall be added unto you."

Coming at this juncture, then, to a discussion of his theory of the subtle relationship between energy and healing, Ash goes on to say, "Just as normal nerve-impulses promote the healing

process, and interference with them hinders it, so can energy from the *healer's* nervous system enhance and speed it up. This God-given energy, available as a result of the healer's *inspiration* of Spirit, is transmitted by him along the patient's nerves. In the course of such an action, the healer is letting himself be used as the human channel of an energy whose source is the Creator.

"If we study what the 'faith-healer' does, we find that this is what he is doing. He is feeding nervous energy into the patient's body at the point where it is 'leaking out.' It is 'leaking out' at the site of the pain which the patient experiences. The pain is experienced there, because that is where there is something wrong—something that requires healing—and the biological purpose of pain is to attract the body's nervous energy to the place that needs it. This energy (normally the patient's own) is needed to set up the healing process. But pain is often accompanied by a loss of energy which 'leaks away' to the earth. This occurrence resembles a 'short' in an electric circuit. It is this loss for which the healer makes up."

It was at this point in our conversation, as we sat together in his laboratory, that I put to Dr. Ash the pressing question, "But how does the healer know exactly where this alleged 'leak' is?"

"For the chaps who know the technique," he said, "it's the easiest thing in the world. One simply moves his hand just clear of the skin-surface, until he detects the slight change in sensation." Then his remarkably expressive eyes lighted up, and in a burst of enthusiasm he added, "You might be able to do this yourself. We shall have a go at it tomorrow forenoon!"

I'll return shortly to this invitation to try an experiment in his clinic the next morning. But first it is necessary to permit Michael Ash to finish the explanation he had just begun.

"You see, a healer is exceptionally sensitive to the change in sensation caused by the 'leak,' and this leads his hand to the right spot. His gift is something like that of the water-diviner.

The 'dowser' is a person exceptionally sensitive to the changes caused by the presence of water below the surface of the earth. This condition is simply registered in the vibrant pull of the divining rod held firmly in his hands."

Meanwhile, it can be imagined with what a sense of eagerness I was looking forward to the experience promised for the next morning. Not only was I once again to be an interested observer in the clinic, closely watching Michael Ash as he manipulated and otherwise treated infected areas within his patients' bodies. At last I was to see whether or not I possesssed the gift so vividly resident in my host.

Finally, the moment for which I had been waiting arrived. The patient was a neatly dressed older woman, who shuffled in slowly, clutching a worn overnight bag in her gnarled hands. I say "shuffled in," because she was notably bent over and carried one leg with a marked limp. The look of pain in her tired eyes was instantly changed to one of sparkling expectancy, as soon as she saw the physician.

While she was disrobing and getting into a long hospital gown in the anteroom, Dr. Ash told me that she came to see him on the average of once every four or five years. She was the victim of a severe rheumatoid condition. The reason she came to the Harley Street office so infrequently was that she lived miles away up in the Midlands and could seldom afford the long journey down to London. In between times, the local doctor administered medication to the best of his honest ability. But when her condition worsened to the point where the pain was unrelenting and she was threatened with being bedridden, she would struggle down to London to see Michael Ash. Each time, after his ministrations, she would gratefully leave the doctor's office, radiant of mien and sprightly of step, proudly imitating the walk of a Grenadier guard. And Ash would not hear of her again for another five years.

When Gracie returned from the dressing room, with the

shapeless white gown billowing about her shuffling knees, the physician requested her to lie flat on her stomach upon the examining table. Having asked her permission for me to observe his therapeutic techniques and to assist him in any manner possible, the physician adjusted the gown so that the old lady's back was bared from her neck to the base of her spine.

"Now," he said, turning to me, "see if you can find the focal point of infection."

I looked at him blankly.

"Go ahead," he urged gently, "you've seen me do it. Place your hand, palm down, about six inches above Gracie's back, starting at the neck and running slowly down, and you'll find the 'leak.' "

He had secured the record of her case history from his files and was now examining it intently. But he had not let me see the chart. I found myself feeling suddenly sheepish and in a bit of a panic. And I thought angrily, "*He* probably knows where the focal point of infection is, but how in God's name am *I* expected to know where it is or what to do about it?"

Almost as though reading my resentful thoughts, he smiled and nodded. "Go on. Start doing it. You'll find out soon enough where the 'leak' of energy is and what to do about it."

Totally inadequate to the challenge, I felt stupid and clumsy. But obediently I placed my right hand, palm down, a few inches above the pathetically scrawny neck upon the table. Slowly I made my way along the tired spinal column. It seemed as though the old lady's back was endless in length and that my airy journey was lasting forever. I had obeyed my mentor with a sense of expectancy, but still nothing was happening. It was one of those raw London days; the room was chilly; and my outstretched hand felt numb and cloddishly insensitive.

Then suddenly, about two-thirds of the way down the spine, I did finally feel something more than an overwhelming sense

of my own inadequacy. My hand instantly stopped its slow journey. My entire palm was suffused with a slight, but acutely definable, feeling of unmistakable warmth, as though I were holding it over a source of low-degree heat. After a few moments, I gingerly moved my hand a couple of inches away from this one immediate spot, and the warmth promptly left my palm. The same thing happened in each direction. Even the smallest movement, and the heat evaporated.

"I told you you'd find it," the voice behind me said quietly. "What, if anything, do you feel?"

In a whisper, so that Gracie could not hear me, I described what was for me a most disarming experience. Looking quickly again at the diagram on the chart, and then back to the spot over which my hand still hovered with its sensation of warmth, he said, "Bully! That's precisely the point at which the energy is being lost, ever and ever. Now please continue to keep your hand at that exact juncture for a few minutes more."

Again I obeyed, not knowing just what to expect. The moments ticked by with painful slowness. Then, in the twinkling of an eye, two things seemed to happen simultaneously. The feeling of heat over my *entire* palm was instantly overcome by a tingling sensation in my *two middle fingers only*. At that identical moment, or so it seemed, the old lady made a grimace of pain and groaned involuntarily. Then, in a second, her face relaxed.

Apologetically, she half-turned her head and said, "It 'urt for 'alf a mo', but naht feels better agayn."

With excitement in his voice, Ash said, "The feeling of heat was the result of the energy leaking out at the point of infection. . . . Did you feel anything different after that?" When I explained, he nodded. "That tingling sensation marks a reversal in the flow of energy. It hurt her a bit for a moment, but it meant that the healing energy had suddenly begun to cancel out

the loss by starting to flow from you into her. It's the old story of the struggle between the good and the bad. In this context, it's virtue overcoming evil."

Turning to Gracie, he gently told her that the treatment was over and that she could rise and dress. But Gracie already knew within herself that the miracle had again happened, for she was halfway off the table before the doctor had turned all the way to her. And when she finally left, with thanksgiving shining radiantly from her eyes, the years had fallen away, and the straight-standing woman who walked out was not the shuffling old cripple who had, less than an hour ago, stumbled in.

The sensations I had experienced in that hour, I had never experienced before. But neither have I experienced them since the day that spring when I left 138 Harley Street and returned to America. This observation leads me to make certain inevitable remarks about that unique experience with Michael Ash in London—no one of which is of course intended to reflect in any fashion upon the physician himself.

To begin with, it must be freely admitted that Gracie's series of remarkable recoveries falls far short of the classical definition of spiritual healing as recorded across the years. Even allowing for considerable latitude in interpreting the intention of the definition, she still fell short in one important area: her cure was not permanent. After one treatment at the hands of Dr. Ash, she could last—with medical aid—for four to five years. But at that juncture, she felt impelled to make her painful way back to London for one more remarkable treatment which, in turn, could be counted upon to carry her for nothing more than one more temporal period.

However, as I have tried to imply earlier, to reject all healings which do not meet the historical requirements of a classical character is to limit the field of the operation of the Holy Spirit unfairly and unduly. If a qualified physician, possessed of

psychic gifts, can sustain a condition of well-being in a patient (even though he may achieve that condition by medically unorthodox means), we then must honestly recognize the presence of a force which deserves to be reckoned with.

Like the Baltimore engineer who unquestionably possesses extraordinary gifts of healing within a possibly limited context, Michael Ash was just as surely, I believe, the possessor of psychic talents. And the gifts of a so-called "sensitive" are not to be currently measured by any of the instruments of known science. Three paragraphs ago, I carefully noted that the apparent healing which I had, perhaps unwittingly, produced in the person of Gracie had constituted a phenomenal experience which I had never encountered in myself before. The point at which I was driving is this: I can find no objective evidence within myself to lead me to believe that I possess, *per se,* any powers of a psychic nature. But, however you may seek to deny it, it is obvious that such "sensitives" *do* possess channeled powers which lie beyond the competence of man-made instruments to measure in all of their fullness. God had been enabled to use me *through* the physician.

For instance, since I had never previously experienced such a healing encounter as the one I had with the old woman in the doctor's office—and have not been cognizant of a similar one since—it is certainly not beyond the realm of probability to assume that Michael Ash was a psychic, and that he was able (via gifts not his own, but which he is sufficiently dedicated to permit God to use) to let Gracie be healed, even temporarily, through me. In and of myself, I had done nothing and had apparently been in possession of no parapsychological powers whatsoever. All I had theoretically done was to allow myself, quite unconsciously at the moment, to be used by the Holy Spirit as He was currently operating through another earthly personality. And since the end result—the betterment of Gracie

—was happily achieved, nothing could have been of less importance than my own fumbling limitations in that creative hour. In short, to be an uncluttered channel of God's grace, directly or otherwise, is to be the bearer of what may well be the miraculous.

At the conclusion of the Fifth Spiritual Healing Seminar at Wainwright House in Rye, New York (headquarters of the Laymen's Movement for a Christian World), an eminent Manhattan psychiatrist, Robert Laidlaw, was asked to write a preface to the tape-recorded and subsequently published report of that seminar, which had been attended by interested clergymen, surgeons, physicians, psychiatrists, psychologists, and lay leaders from all over the United States.

In that provocative preface, Dr. Laidlaw wrote in part as follows:

"In reading the transcript of the Fifth Spiritual Healing Seminar, I must admit to a feeling of optimism. Since our first meeting, progress has been made in defining this most complex field of study. At first, we were groping in murky darkness; now there are faint signs of light.

"This progress I would summarize under three needs: (1) the demonstration of the phenomena of healing; (2) an approach toward a definition of the possible forces involved in the power; (3) the conditions under which this power acts optimally, first through the individual, and second through a group."

Then, in answer to the pertinent question, Does a power of spiritual healing actually exist? it is Laidlaw's carefully considered judgment that "we can answer with an unconditional 'Yes.' On this phenomenal level, we have testimony from healers of incontrovertible integrity, and from scientists who affirm that certain rare healing processes, which they have exhaustively studied, lie beyond any so-called 'scientific' or 'natural law' explanation. To my mind, *this constitutes a challenge to us to*

enlarge our concept of the field in which law operates. [Italics mine—Author.]

"I do not believe that when this rare phenomenon of healing occurs, it is the result of successfully persuading a capricious deity to set aside the order of the universe and bring such a healing to pass. I believe that this type of healing is just as subject to law as are the more commonly encountered healing processes. But it is subject to laws of a higher order—spiritual laws, if you will—about which we know so very little. When a certain complex of conditions is met, such spiritual laws become operative and healing takes place. Were we to understand fully the complexity of these prerequisite conditions, I believe that the phenomenon of spiritual healing would be repeatable."

Laidlaw then notes the explorations of people like Julius Weinberger, a physicist for the Radio Corporation of America. "In the present state of our knowledge, when we try to define this force scientifically, when we ask, 'What is it?' we are confined to tentative theories. Mr. Weinberger, for example, believes that magnetism and electric fields are concomitants of this force. In England, the Society of Radiesthesia is devising instruments to measure this power which is believed to be akin to radioactivity. In some preliminary experiments, Mr. Weinberger has attached dental X-ray films to the hands of a healer during healing, and has found on them evidence indicating radiation of the general nature of high-energy X rays. Thus, though we are still far from being able to answer 'What,' we are refining our techniques of measurement and definition.

"Thirdly, under what conditions does the power of healing reveal itself? Here we have gained our greatest insight into the question by an examination of the individual healer. Many and interesting, especially to the psychiatrist, are the things we have learned about him. Here are a few. First of all, he must be one who elicits rather than inhibits. He must be a 'resonant cavity,'

an 'instrument,' an 'open channel.' He must be relaxed. His senses must be highly acute. He must be a 'dedicated person,' devoted to the well-being of his patient. He must be in a state of 'openness,' of conscious or unconscious prayer; he must have expectancy and faith. His gift often involves paranormal powers such as telepathy or clairvoyance. Perhaps one might say that, though not all sensitives are healers, most healers are to some degree sensitives. Here are the beginnings of a personality profile. We still need to focus more finely on the healer. . . . These pioneering endeavors may in time open paths into a new spiritual frontier. Let us have patience to proceed further. Our goal is a great confluence—the point at which science and religion meet."

Meanwhile, it must be fairly admitted—and perceptive men like Laidlaw would surely agree—that the new pathways are peppered with pitfalls. As Richardson says, speaking of remarkably gifted healers, men of unquestioned integrity, "Such healers form a rather definite type. Origen early remarked, 'For the most part it is the uneducated who do these things. . . . The overcoming of demons is not in need of anyone wise or powerful in the rational demonstration of the faith' (*Contra Celsum,* 7:4). That is to say, such persons are generally those in whom the critical spirit is less developed, and who are of the visionary or 'psychic' type. . . . Then again, such healers often have definite and limited areas in which their work is effective. . . . Their records are so often inaccurate, and their willingness to encounter critical appraisal often so lacking, that the study of their work is indeed difficult.

"But though we must recognize this, we must not fall into the error of supposing that all their reported cures are fiction. The fact seems to be that the development of the critical spirit *hinders* this type of work, and is a real danger to the religious healer. (We meet precisely the same situation in the study of

paranormal psychology. The strange powers of genuine mediums are notoriously hard to assess, since a critical atmosphere hinders their operation.) Yet the genuine nature of such healings must not be waved aside for this reason. Those who are able to appraise the material most fruitfully, are exactly the people who are least able to do the cures themselves. Rather should they rejoice that there *are* such people in the world, and accept the limitations under which religious healers have to work."[2]

As a kind of postcript in passing, it would be a salutary exercise in humility for all of the Doubting Thomases in this field to remember the millions of people, here and abroad, who once derived uncounted laughs from the consideration of a newly discovered mode of marine transportation, derisively dubbed "Fulton's Folly"!

*

V. GO SHOW YOURSELVES UNTO THE PRIESTS

AS THE LAST CHAPTER recounted the story of the first of two general types of spiritual healing, namely, the comparatively rare phenomenon of the charismatic, wherein the curative power seems to reside peculiarly within the person of the healer himself, so this chapter will concern itself with that vastly more common kind of healing known as the sacramental.

This second type of healing is the one which is of incalculably more practical value to the man in the street than the first type, at least in its present form, could ever hope to be. In this current day and age, there are many millions of *us* to every single known *healer*. Therefore, the chances are at least a million to one that the overwhelming majority of the rest of us will almost inevitably live out the span of our earthly lives without ever having encountered a healer or received the benison of his mystic ministrations.

Whereas charismatic healing always comes via a specific individual, the sacramental kind is generally mediated through a dedicated group. "For where two or three are gathered together in my name," says Jesus, "there am I in the midst of them" (St. Matthew 18:20). This observation is in no way meant to imply that Jesus cannot also be creatively present in the psychic

individual. But it does reinforce the promise that He will always be at the heart of any group, large or small, gathered together to seek, to find, and to do His will.

Without even remotely intending to equate the charismatic individual with the earthly Jesus, I should like to mention one undeniable factor which gives them something in common. That is, if you desired to receive literally the healing touch of Jesus in person, you had to have an actual encounter with Him in the flesh. You had to be living in a remote corner of the Roman Empire almost two thousand years ago, and you and He had to meet each other at a specific time and place. So it also must be, if you desire a tactile relationship with the comparatively rare individual who manages to convey extraordinary powers of physical healing.

The loving congregation, on the other hand, need be in possession of no extraordinary gifts whatsoever. As a matter of fact, the law of averages clearly indicates the total absence, by and large, of any such talents. But whether the group is a foregathering of untutored peasants or of intellectual giants or of remarkably gifted mystics, this loving congregation has reverently come together simply to *evoke* the healing Spirit which the officiating priest or minister, acting as their spokesman, will then *mediate* sacramentally, as he was ordained to do.

In this profound sense of the word, the incarnate Jesus who once, for a remarkably brief period, walked the dusty roads of Galilee at a specific time and place in the world's history, is now the risen Christ—available everywhere to everybody invoking His name. That's why the Church has always been unerringly called the Body of Christ. For it is *the extension of the Incarnation* in history. As a fleshly framework was once, for thirty-three years, the temple of the earthly body of Jesus, so the Church is now, for all time, the temple of the celestial Body of Christ.

Parenthetically, I hasten at this point to emphasize the fact that charismatic healing and sacramental healing are in no wise mutually exclusive. It is not necessary that the gift of one type shall preclude its being mediated by way of the other type. Earlier in this volume, there were listed certain traits of personality which are characteristically held in common by most known healers. It has been my privilege to have known several such healers, who were also ordained ministers. Whether or not they knew that they actually possessed this particular gift of the psyche is beside the point, for, in any event, they preferred to convey the healing touch of the Christ entirely within the framework of the sacramental ministry to which they had been called.

The reason, perhaps, why they *seem* to be mutually exclusive to the popular eye is that the "sensitive," with his esoteric talents, is always a dramatically breathtaking sight to behold. Whether his gift be that of clairvoyance or of precognition or of being able to make a tumorous mass disappear before your startled eyes, you feel yourself to be in the presence of a mystical something which is literally "out of this world."

The Church, contrariwise, is a comparatively pedestrian organism, conservative and staid in character, and understandably chary of the esoteric and the melodramatic. For centuries after the resurrection of Christ, His faithful disciples gave prominence to the ministry of healing within the framework of the Church. But then, not long after the conversion of the pagan Emperor Constantine in the fourth century, the sacrament of Holy Unction began to fall into disuse. In the depths of his ignorance, Constantine thought himself able to strike a bargain with God. If, in his struggle against the barbarian invaders, he should win the crucial fight known as the Battle of the Milvian Bridge, he promised that he would become a Christian. Following this commitment, the emperor saw a heavenly vision.

Etched across the sky above the battlefield, he said a great Cross appeared, accompanied by the words *in hoc signo vinces.*

When he subsequently won the battle, Constantine was convinced that he had indeed conquered in the sign of the Cross. In any event, he had made a promise whose conditions had apparently been fulfilled. So he became a Christian. The irony of the situation, however, was this. Up until that world-changing moment, to espouse the Church was a dangerous and sacrificial business, which might even cost a man his life. Therefore, primitive Christians were men and women of sufficient spiritual stature to live by their faith and, if need be, to die for that faith.

But powerful Constantine had come into the Church on the basis of a bargain. It was a business contract, not necessarily accompanied by the kind of conviction which had always characterized the early Church. However, the Church suddenly became an organism to which the emperor, by virtue of his position, had brought great prestige. The Body of Christ was elevated from its underground position, and it was now fashionable to be known as a member of that Body. Nor was Constantine unduly patient with stubborn groups who were slow in applying for membership. If Christianity was good enough for the emperor, it was certainly good enough for the proudest citizen and the humblest peasant. So the first mass conversion in history was on.

But because it was largely a conversion prompted by ignoble motives, it was not a healthy conversion; and it is easy to see how, as a result, the Church was unwittingly dealt a well-nigh mortal blow. With the faith reduced to such a watery substance on the part of so many, the Body lacked nourishment. In this hour, the Church was no longer characterized by that unadulterated purity of spirit which makes spiritual healing possible.

Then, to compound the felony, evil days began to haunt the soft and self-indulgent empire. The barbaric hordes were sweeping down from the forests of northern Germany in ever greater numbers. They were hammering insistently at the gates of Rome and were not to be denied. The Dark Ages were looming over the not-too-distant horizon, and the lights of the Church began burning lower and lower. And it was not until the Carolingian revival, beginning under a gallant little Frankish monarch named Pepin the Short in 751, that the sacrament of Unction was restored to common usage once more.

Again an ironical fact inserts itself into the picture. The rite was restored in all good faith, but since spiritual healings themselves had become so few during the Dark Ages, the sacrament was limited in its use to what is now known in the Roman Catholic Church as *Extreme* Unction. That is, its application was restricted to the dying. It was solely a last rite. If death did not occur, and bodily healing did, the recovery was considered almost accidental in character and, in any case, was not to be directly attributed to the sacramental act.

So this sacramental rite, which was well-nigh lost to the Church by the end of the fourth century, was by no means entirely recovered by the renaissance in the latter part of the eighth century. In fact, the Christian enterprise, almost down to this present day, has needlessly inhibited one important aspect of the operation of the Holy Spirit by continuing to leave the ministry of healing to psychic individuals in general and to medical science in particular.

These, then, are some of the many reasons why popular interest and objective investigations have tended to focus, in the past at least, more upon the gifted individual than upon the sacramental form. Finally, one must face the fact that there are literally millions of Christians—to say nothing of the count-

less non-Christians, both religious and otherwise—to whom the word "sacrament" is relatively empty of meaning.

For example, the same Robert Laidlaw, who, after careful investigation, wrote about the traits of personality which generally characterize effective healers, concluded his paper as follows: "Lastly we have found out that the power of healing exists not only in persons, but in groups, usually in dedicated groups under the auspices of some church ritual. Dr. Day, Dr. Large, Dr. Rettig, and others, have described cases of definite healing taking place during their healing services. In the case of sacramental healing, the medically trained person is, though not incredulous, a little more baffled. The laying on of hands by a pastor during his ministry, or the effective force of a prayer group co-operating with him, does not easily lend itself to scientific measurement. Here we need a new approach. We should, however, remember the words of Steinmetz, the electrical genius of the General Electric Company, who stated that the next realm for research was the spiritual, and the next field that of prayer."

As a prelude to such research, it is of significance to remind ourselves that this world is patently a sacramental one. If we are immortal spirits, housed temporarily within a physical fabric, then—as far as all communications are concerned, whether between ourselves or between each other and the Creator—we are totally dependent upon the sacramental outward and visible signs of an inward and invisible Spirit.

That is to say, pure Spirit is both unknown and unknowable, *except as it is mediated through physical channels.* For thousands of years, as the herculean effort is recorded in the pages of the Old Testament and elsewhere, sensitive men and women fumbled toward an apprehension of the character of God. Their successes, fair or indifferent, are permanently recorded in these literary sources of spiritual inspiration. But then, in what

God considered the fullness of time, He chose to become incarnate. In Jesus Christ one sees not the *quantity,* but rather the *quality,* of God. And as an ultimate revelation of that eternal quality, Christ's public ministry was entirely a sacramental ministry. Every inward truth was predicated upon, and expressed by, an outward action. Whether He was demonstrating His divinity by turning water into wine at a marriage feast in Cana, or conveying a sense of divine nourishment to five thousand hungry people during the course of a noonday gathering in Galilee, or, in the act of restoring sight to the man born blind, employing a mud pack of clay and spittle, He was always conveying the reality of Spirit through the medium of flesh.

As such, sacraments are not simply symbols, but actual vehicles and channels of Christ's continuing incarnation through His Body, the Church. Sacraments, then, are the literal means of His grace and the physical bearers of His Presence, whether that Presence be expressed via water, bread, wine, oil, or the hand of the priest touching the recipient in blessing.

The sacrament of the Holy Communion, for instance, is not merely a memorial feast. It has nothing in common with the act of placing a wreath on the tomb of the Unknown Soldier on Memorial Day, for instance. Nor are the consecrated elements of bread and wine merely symbols or reasonable facsimiles of reality. They then *are* the reality, under the outward guise of wine and bread.

This is not to insist that the Presence of Christ, invoked by the celebrant at Christ's own behest, changes the chemistry of the elements involved. The bread may still be the end result of the combined contributions of the wheat-growing farmer and of the dough-making baker; and the wine may still be the fermented fruit of some grape-grower's southern slope. But now it becomes all of these things, *plus the divine infusion of*

the Presence. As the life of Jesus is the prime example of pure Spirit becoming flesh, so is the life of the Church the prime example of pure Spirit *continuing* to become flesh through sacramental channels.

So the distinctions between the gifted individual and the sacramental group begin to be more sharply delineated. The individual healer may well be a man who works within the framework of the Church, but the fact remains that he always has the power (which he usually exercises) of operating as a self-contained, one-man enterprise. On the other hand, the priest operating within the context of the sacramental life need possess no charisma of any kind, apart from that inherent in his ordination. In point of fact, he may actually be a mediocre pastor and an unimaginative clod. He needs only the merits of his valid ordination and a serious "intention" of invoking the aforementioned Presence sacramentally. For, to repeat, he is simply the ordained spokesman for the "two or three"—or two or three thousand—gathered together in Christ's name, and the earthly mediator of the pure Spirit of God through material media. That is why, at least as far as his priestly acts are concerned, he may never act alone. He must always be the spokesman for the one, and the mediator of the Other.

Also, the effectiveness of an individual healer's ministrations will depend upon the effectiveness of the healer himself. But the efficacy of a sacrament, thank God, does not rest upon the personality of the officiant. The faith of the priest can indeed be expected to be strong; and certainly the faith of the expectant patient will mount as the eagles. But the happy point is that the power of a sacrament does not thereby hang in the balance, as long as Faith with a capital "F" is somewhere present. And the fountainhead of the Faith reposes within the common tradition of the Holy Catholic Church as the Body of Christ throughout all history.

This, parenthetically, is the chief reason why, in my own ministry of healing, I have always declined to leave my local bailiwick in answer to the plea of some far-off minister that I please come and administer Holy Unction or the Laying-on-of-Hands to a parishioner in distress. Whether the call has come from a famous old pastor in Walla Walla or from a nervous young vicar in Hungry Horse, I always feel impelled to answer something like this: "Thank you for your confidence in me and for the honor you've bestowed upon me in asking that I fly out to bring the sacrament of Unction to your seriously sick parishioner. I also appreciate your being so willing to pay all my expenses. But even if I had the time—which I don't—I wouldn't feel justified in making the trip." I say, "*You* are an ordained priest of the Church, no less than I am. And be it large or small, *you* have a loving congregation. And since you have the Church, you have full access to her sacramental life. In that connotation, you are the spokesman for your people and the mediator of your God. . . . *You* lay your hands on old Mr. Smith's head!"

We are a timid people, unduly overwhelmed by the temporal certainties of the scientific tradition. Too many otherwise intelligent pastors are needlessly inhibited by the false notion that sickness can be cured only by physical medicine or through the medium of an individual healer possessed of some mysterious charisma. True, sickness can be, and indeed long has been, healed by both of these media. But, as the New Testament and hundreds of years of Christian experience are here to attest, it can also be cured through the sacramental life of the Church.

As a matter of fact, respected men of science are currently pleading with Churchmen to throw off their un-Christian spirit of negativism and timidity. Admittedly, many scientists are as doubtful as their professional brethren in the Church concerning the ministry of healing. But a breakthrough, on the

part of scientists themselves, is under way. For example, Dr. Gotthard Booth says, "The negative attitude of the majority of contemporary scientists and educated laymen should not be taken for a scientific verdict that spiritual healing is impossible. Its two main features, unusual behavior of matter and communication without physical means of transmission, have been proved possible according to the most exact standards of science."

Back in the 'thirties, the great physicist Eddington, in his classic *The Nature of the Physical World,* reminded us that no law of nature would be violated if, for example, this book in your hands should suddenly disintegrate and fall out of your sight. That is, all the electrons of which it was put together could have moved into such a pattern that it would fall through the interstices of your hand, just as salt runs freely through the holes in the top of the shaker. And neither science nor the Church has a corner on that knowledge, or on its application or possible control.

Booth then goes on to say, "Applying the foregoing, for instance, to the miraculous disappearance of a cancer, such an event does not contradict the medical experience that the overwhelming majority of cancers spontaneously grow until they have destroyed the life of the organism. Medicine has known for some time that 'spontaneous cures' of cancer do occur, but so far scientists have not investigated the circumstances under which they took place. At the present time such research is under way. It suggests that spiritual healing fits into the general concept developed by psychosomatic medicine: that bodily diseases express specific psychological conditions of the patient and that they disappear if the underlying condition has disappeared spontaneously or by treatment."

To sum up the whole matter, Booth concludes that "neither the unusual physical changes nor the unusual forms of com-

munication found in spiritual healing are incompatible with our scientific knowledge of physics and of psychology. . . . Medical treatment of illness includes concern with the spiritual condition of the patient."

It is this business of the spiritual condition of the patient which often presents a puzzling element that nags hauntingly at the mind. Anybody who has made even a cursory study of the ministry of healing has been forced to face the fact that many a spiritual giant has gone unhealed, whereas the spiritual pygmy is sometimes cured completely. By way of seeking to account for this apparent paradox, several hypotheses have been advanced. But no answer can be ultimately satisfactory, unless it includes a great surmise about the ever-present problem of pain.

Now, no one is less in love with pain than I am. I never dally with it any longer than I have to. Unless he is a masochist, no man enjoys pain or seeks its presence. Even Christ Himself, in the Garden of Gethsemane, prayed that the cup of agony might pass from His lips, and that He might be spared the galling taste of its bitter dregs. But the right choice was the sacrificial one, and the sacrificial one was—literally as well as figuratively—the painful one. Jesus could actually have fled the Garden that night, and avoided the suffering of Calvary the next day. But if He had so fled, the world would henceforth have been an infinitely poorer place for all of us. By taking our pain upon Himself, He redeemed us from a vastly darker pain.

Pain has its meanings and its therapeutic values. And though many a spiritual giant has been permanently cured of a painful disease by sacramental means, it is nevertheless he—rather than the man with the spirit of a pygmy—who is best equipped to handle pain creatively, both in his own life and in the lives of those around him. It is he who can most fully mature under the

impact of pain. And he it is who can best bring its therapeutic values to bear sacrificially in the service of others. The essence of one of Emily Dickinson's most perceptive poems may be summed up this way: Essential oils must be *squeezed* out. The attar from the rose is not achieved as the effortless gift of balmy sunshine only. Rather, it comes as a result of the application of screws under heavy pressure.

Before considering two examples of the therapeutic value of pain in action, let's think of pain in its most primitive sense—namely, that of the watchdog of the body, always standing by to give warning that something has gone wrong. One day back in 1950, the press carried a startling story. It went like this: "Some babies 'never cry.' In this case, it was almost literally true. Beverly Smith didn't cry when she fell down; she never cried when she bumped her head. She didn't even cry when she burned her hand on a hot stove."

With that brief paragraph, *Time* magazine began the dramatic tale of a human being who was actually painless as a result of a defect in her nervous system. In an imperfect world such as this, full of pain and suffering, little Beverly's defect might sound like a blessing. Hemmed in by troubles on all sides, we might envy Beverly and be tempted to run risks. If only life could be completely painless for all of us! But listen to the way *Time* concludes its report of this amazing phenomenon.

"Last week Beverly's mother . . . took the baby home with a lot of advice from the doctors. She must watch Beverly constantly: the baby might break a bone and continue using it until it could not be set properly; she might develop appendicitis without nature's usual warning of pain. Spanking her to make her more careful about hot stoves and knives would do no good; she wouldn't feel it. A life without pain will be a perpetually dangerous life for Beverly."

Note, if you will, that last sentence. *A life without pain will be a perpetually dangerous life for Beverly.* And not just for Beverly, either. A life without pain would be a perpetually dangerous life for anybody. Of course, the news item was concerned with lack of pain from the point of view of the scientist; and the story, according to the emphasis *Time* gave it, was concerned only with the growing child's physical welfare. But a spiritual truth often lies at the core of a scientific observation. Little Beverly's problem was indeed primarily physical, especially at that early stage of her life. But Beverly's lack of the power to feel pain is a tragic one. For all of us, it is true that it often takes physical pain to inculcate a moral, an ethical, or a spiritual lesson.

More than one man has succeeded in cutting down on his drinking because he got tired of living through the painful hangover which came after the party. More often than not, it is from a bed of pain—rather than from a bed of roses—that a man rises with new insights into the gifts of adversity. It is the dark night of suffering which deepens men's gratitude for the common blessings of the day. Until a man's heartache over the injustice he sees around him becomes an *actual* ache, he rarely takes any sizeable steps to correct that injustice. The eyes which have never known tears are the eyes which can never know the release of heartfelt laughter. The man who has never felt the draining agony of seeing a dear one tempted and failing is the man who has not yet experienced the fullness of love.

Let a man think twice before growing rebellious over living on and off with pain. The tragedy is not that good people suffer pain. It is the way in which they have *handled* their pain, open or hidden, that has contributed richly to their maturity of spirit. Beverly's case is the truly tragic one. So, when we pray over people in pain, let's also remember to pray for the person who can never *experience* pain.

But since, as a valid part of any study of spiritual healing, it is important to examine the therapeutic value of that pain which persists before healing comes, this is the point at which to make the examination. Two examples, one from history and one from literature, will suffice to illustrate the practical uses of the gifts of adversity.

When Woodrow Wilson was president of Princeton University, he was a man suffering from the chronic presence of pain. He did everything medically possible to have the pain alleviated. Above all, he prayed daily and fervently: "Dear God, please take this pain away from me. I'm making this plea, not just for selfish reasons, but because I want to be the best university president possible. And I feel I could make a better rendering of my stewardship, if I were not dragged down by this pain. So please take it away!"

The weeks and months passed, but the suffering did not. Wilson continued faithfully to pray. But when he reluctantly realized that the pain was not going to be taken away, he changed the burden of his heartfelt petition. In short, he now prayed something like this: "Heavenly Father, if the pain is not going to be taken *away,* then please give me the strength to *take* it!"

And God did. Now, it is admittedly always dangerous to draw inferences from situations which are forever beyond the pale of positive proof. But it is entirely within the realm of fairness to make a statement and then to pose a question. Whatever the color of a man's political affiliations may be—and whatever he may have thought of Woodrow Wilson in his lifetime—it is certainly true that each passing decade deepens the general respect with which Wilson is regarded by history. He was a man who, from the days of his Princeton presidency until he left the White House, was ever growing in interior stature. Nobody, of course, will ever know whether he would have been

as great a soul *without* the pain that he so courageously bore. But is it not probable that the bearing of his personal burden helped to toughen the fibre of his being—and that the Christian way in which he handled it helped immeasurably to enlarge the stature of his spirit?

The other illustration of the therapeutic value of pain is taken from Thornton Wilder's brief but brilliant play, *The Angel That Troubled the Waters,*[1] which treats of the New Testament story (St. John 5) with fresh insight, an unorthodox approach, and a judicious use of poetic license. The play is set by the pool of Bethesda, famous for the fact that an angel comes down once a year and riffles the waters. The first of the many sufferers lining the pool who is able to hobble into the pool after the angel has troubled its waters is promptly cured of his disability. But one sick man has come there, year after year, without ever managing to be the first one into the pool at the strategic moment. So he has never been healed. This is the apparently unfortunate soul who is the play's protagonist.

As Wilder's drama unfolds, the man is at the edge of the pool at the proper moment when the angel is about to appear to riffle its healing waters. We find him praying in a fierce agony that God might touch his tortured soul back to wholeness once more. But the angel, approaching the pool, pauses and leans over to whisper gently in his ear.

"Draw back. This moment is not for you. . . . Without your wound where would your power be? It is your very remorse that makes your low voice tremble into the hearts of men. The very angels themselves cannot persuade the wretched and blundering children on earth as can one human being broken on the wheels of living. In Love's service only the wounded soldiers can serve."

And in that moment the angel stepped down into the waters and troubled them. As the disappointed sufferer numbly

moved to one side and drew back, a lame old neighbor, smiling his gratitude, made his painful way into the pool and came out healed. Joyously, and with a song of thanksgiving upon his lips, he approached his lonely friend, who was still standing there like a statue of grief, thinking wistful thoughts of what might have been.

"May you be the next, my brother," said the neighbor. "But come with me first, an hour only, to my home. My son is lost in dark thoughts. I—I do not understand him, and only you have ever lifted his mood. . . . My daughter since her child has died, sits in the shadow. She will not listen to us."

To comment upon Thornton Wilder's terse exposition of the therapeutic value of suffering would be only to labor a point beautifully made, as well as to create an anticlimax. The angel spoke the significant word on the subject. "In *love's* service, only the *wounded* soldiers can serve!"

Whether we understand the divine therapy implicit in pain, or whether it still strikes us as a baffling evil, it is nevertheless the avowed function of the Church's ministry of healing to restore health and wholeness to the wounded. Therefore, the first task of the sick man who wants to avail himself of such a ministry is to seek out a loving nucleus acting within the Body of Christ. In particular, he should search for ingathered members of that Body who meet regularly to share in healing services themselves. Such a group may be found gathering weekly before the high altar of a great cathedral or perhaps within the prayerful walls of a primitive chapel half hidden in the wilderness.

But, as was mentioned earlier, most valid healers, along with healing groups of unquestioned integrity, are wary of undue publicity. An untutored public is all too ready to look upon the ministry of healing as a kind of black-magic short cut to health, or to think of such a ministry solely in terms of physical well-

being. The most effective cures are often the ones which come quietly, almost as a thief in the night. Therefore, the sick man's search may perhaps be a long and a painful one. But it is a pilgrimage not to be lightly treated, nor impatiently abandoned.

Let's suppose that *you* are the sick person involved. Let's further suppose that, like the woman described in the fifth chapter of St. Mark's Gospel, you "had suffered many things of many physicians, and had spent all that [you] had, and [were] nothing bettered, but rather grew worse." Finally, let's suppose that your failure to recover your health over the years could not be laid at the door of any one of those many doctors, for your bodily breakdown was simply the outward expression, at long last, of an inward breakdown in your observance of the laws of the spirit.

As for the physicians themselves, they were either highly qualified specialists, concerned only with the malfunctioning of a specific organ of your body, or general practitioners, too busy to attempt more than the administering of medicine to a pill-resisting physique whose cure really lay in first curing the sick soul. Meanwhile, you had forgotten, if ever you knew, that the prime medicine for any cure of a malfunctioning of the spirit is the tonic of honest self-examination—and that the results of that examination should then be brought to a pastor of the Church.

But now you've taken to heart the lesson so painfully learned. You've made your self-examination and have uncovered some skeletons in your spiritual closet. It was a major effort to come face to face with the unsavory guilts, fears, and resentments so long roaming the precincts of your heart. But it was an effort crowned with success. You have finally identified your adversaries and have charged them with illegal entry. They must be promptly evicted. But how? And even if they are swept out, what shall replace them, and how shall this replacement be

arranged? You dimly recall Jesus' warning about the house, swept and garnished, after the departure of the demons. Left empty, it was immediately overrun with a worse set of devils.

Well, here is where your new pilgrimage of the spirit begins to be launched. Your search for a loving congregation—the dynamo of the ingathering Presence—has been rewarded. In fact, you have already timidly attended one of the healing services in which they were sharing. You came there shyly and out of a sense of curiosity—still not at all certain that this sort of thing was for you—and you came painfully, for your arthritis had suddenly begun to bother you more acutely.

Sitting quietly in a corner at the rear of the church, you noted that at least half of those present looked perfectly healthy, and you rightly surmised that they were probably there as an act of thanksgiving and because of a concern for others who, like yourself, were obviously not perfectly healthy. And it was this brooding sense of concern, you guessed, which might well account for the overarching atmosphere of love which so patently pervaded the place, and which you had rarely been aware of in any gathering before.

After the Holy Communion had proceeded to the end of the Creed, a brief period of informal prayer began. As well as you could remember, the celebrant's petitions mentioned about twenty-five persons who had specifically asked to be prayed for by name. This list of petitions was followed by a prayer for the physicians, nurses, and patients of a particular hospital in the city. Then the celebrant gave a ten-minute meditation, in the course of which he pointed out that these healing services were always preceded by the service of Holy Communion, not only because the latter was the Lord's own service, instituted by Him, and therefore the central act of Christian worship, but also because it set the stage for healing by its most intense invoking of the Holy Spirit.

This personal Presence, he added, should be accompanied by a personal encounter between the priest and the person in trouble. He therefore urged that any stranger in the congregation be certain to make himself known to the priest, in order that one or more counseling sessions might be arranged. Only so, he said, could the cause and cure of the trouble be confidentially dealt with on a person-to-person, give-and-take level of sharing. Otherwise, the individual would be coming only a part of his journey on the new pilgrimage, and the prayers would be offered, as it were, in a vacuum unfilled by personal knowledge of the needs involved.

You were not sure that you were quite ready yet for this invitation to a personal encounter, but it gave you a warm feeling to be wanted, and to know that there were in the world strangers such as this one, who cared enough to want to share your burdens with you, and who could thus lead you to some kind of confession and absolution of your sins. You did recall, in your recent, aimless thumbing through the New Testament, that the accounts of the Lord's healings were often predicated upon a remark like "Thy sins be forgiven thee." *Then* the command would follow, "Take up thy bed and walk!"

At the conclusion of the Holy Communion, there was a music-filled pause, during which those who had come *only* for the Eucharist departed quietly. When the last rustle had died away, the priest reappeared at the altar and quoted two verses from the General Epistle of James (Chapter 5):

> Is any sick among you? let him call for the elders of the church; and let them pray over him, anointing him with oil in the name of the Lord:
>
> And the prayer of faith shall save the sick, and the Lord shall raise him up; and if he have committed sins, they shall be forgiven him.

He then cordially invited "all those who desire to receive the ancient sacramental rite of Holy Unction and the Laying-on-of-Hands" to come forward reverently to the Lord's altar rail. You were the last to come, and you came forward with great hesitation, in a mood of mingled doubt and expectancy but, above all, in the mood to receive a gracious gift. As the priest drew near your kneeling figure, you noticed that, resting upon the back of his left hand and attached thereto by a circular piece of metal around his ring-finger, he carried a tiny cup of holy oil soaked in cotton. Then he was suddenly before you. He placed his hands upon your head and, making the sign of the Cross on your forehead with his right thumb, said, "I lay my hand upon thee, In the Name of the Father, and of the Son, and of the Holy Ghost; beseeching the mercy of our Lord Jesus Christ, that all thy pain and sickness of body being put to flight, the blessing of health may be restored unto thee. Amen."

When this brief rite was over, you saw that the officiant was standing at the narthex door, greeting each of the people as they departed. And for each he seemed to have a special word of inquiry or of congratulation. As you had been the last to come forward to the altar rail, so were you the last to approach the door. Although loath to admit it, you were fearful that you might be about to involve yourself in the mysteries of this strange "encounter." And, sure enough, when the priest shook your hand and made you welcome, he suggested an early appointment in the church study, which his secretary would arrange at a time of mutual convenience. With a trace, perhaps, of truculence, you announced that you were frightfully busy. With a smile, he replied that we were all too busy these days, but that he was sure sufficient time could somehow always be salvaged for an important chat. You then hastened to insist that your problem was between you and God, and that you didn't need his counseling services, thank you.

Being a wise pastor, he did not at the moment burden you with theological support of his position. Instead he said, "I'd simply like the privilege of getting to know you. It may be sentimental of me, but I like to personalize my prayers. It's important for a person to know who and what he's praying for. No problem is insoluble. If you have one, I'd like to help you resolve it, with the seal of the confessional upon anything you ever care to tell me. Furthermore, it's very important to know whether or not you are regularly seeing a physician. If, for example, you are physically sick and are not in the care of a doctor, you should not make it a practice to come to these services. Please let me tell you why. A man might be suffering from severe headaches, but refuses to consult a physician. Instead, he comes to these healing services. Without going into any of the possible reasons why, he might suddenly feel a marked abating of head pains. *Meanwhile, he might unknowingly be dying of a brain tumor.* Now, if you are seeing a doctor, I'd like him to know that you are beginning to attend these services; and I'd also like to see him myself, to find out how I may best co-operate with him in helping to cure you. Medicine and religion are just two of the uncounted channels God uses to heal His sick children."

So it was that you began to learn, even at this comparatively early stage, that no man achieves complete wholeness without plumbing the depths of his sacramental encounter with the Body of Christ. That is to say, the Holy Communion between God and man is, in this world's sacramental sense, literally impossible until the bread and the wine (and the gift of ourselves) are brought to the foot of the altar.

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VI. BE OF GOOD CHEER: THY SINS BE FORGIVEN THEE

In addition to Holy Unction and the Laying-on-of-Hands and the Holy Communion, there is another sacrament generally associated with the ministry of healing: that of Penance. Now for millions of Christians the world over, this ancient rite is the proverbial red flag to the infuriated bull. That is, the confessional act conjures up for these people the picture of a musty box the size of a telephone booth, carefully curtained and screened.

According to this misconception, a somnolent priest sits in hidden boredom within the box and listens to the thoughtless parrotings of clergy-ridden parishioners, after which he momentarily rouses himself, pronounces a species of witchcraft over them (somehow involving the forgiving of sins), and then proceeds to impose upon the penitent his penance—usually nothing more than a dozen "Hail, Marys" or a few mumbled "Our Fathers," after which the confessee allegedly goes forth blissfully free to commit murder, mayhem, or miscegenation all over again.

Now, the making of auricular confessions is undoubtedly abused by uncounted people who take the clean-wiped slate and promptly chalk obscenities all over it again. And probably the *hearing* of confessions has often been abused. When any spirit-

ual act becomes an enforced act, it runs the risk of also becoming a largely mechanical act. Too, a sacramental rite, improperly understood, can easily degenerate into a superstitious rite. And there are always those people who, taking advantage of God's mediated forgiveness, would calmly go out and commit the unforgivable, could they find the occasion.

But the way to abolish an abuse is not to abolish the act itself. To do that is to throw out the baby with the dirty bath water. It is the part of wisdom to cleanse the soiled baby, but then to keep him. Because prostitution has dogged the steps of man, we do not thereby abolish love from the face of the earth. The Episcopal Church, among other non-Roman bodies, has resolved the dilemma arising out of the abuses of confession, absolution, and penance by treating this whole area as a voluntary matter of a man's own conscience. And it is a matter whose form is not rigidly prescribed. Hence the Book of Common Prayer, in its section on the Visitation of the Sick, contains a couple of incisive and carefully worded rubrics:

> Here may the Minister inquire of the sick person . . . as to whether he repent him truly of his sins, and be in charity with all the world; exhorting him to forgive, from the bottom of his heart, all persons that have offended him; and if he hath offended any other, to ask them forgiveness; and where he hath done injury or wrong to any man, that he make amends to the uttermost of his power.
>
> Then shall the sick person be moved to make a special confession of his sins, if he feel his conscience troubled with any matter; after which confession, on evidence of his repentance, the Minister shall assure him of God's mercy and forgiveness.

The healing intent of these instructions is crystal clear. The mere making of a generalized confession is not enough, especially *if he feel his conscience troubled with any matter.* And

few, if any, of the saints themselves have gone long in life without feeling the gnawing pangs of a troubled conscience. Then a special confession shall be made, in which he freely forgives those who have offended him, thus wiping out any poisonous resentment from his heart. He also humbly seeks the forgiveness of those whom *he* may have offended. And where he has wronged another man, he solemnly promises to make amends to the uttermost of his power. These are the demands of a classic penance! And it is only when they have been met, that the penitent is absolved of his sins and assured thereby of God's forgiveness.

Since sin and sickness are often so closely allied—and in that order—these provisos have always been a traditional part of the life of the Church. It is thus by no mere accident that in the Episcopal Ordination service these permissive words appear, to be spoken by the ordaining bishop:

> Receive the Holy Ghost for the Office and Work of a Priest in the Church of God, now committed unto thee by the Imposition of our hands. Whose sins thou dost forgive, they are forgiven; and whose sins thou dost retain, they are retained. And be thou a faithful Dispenser of the Word of God, and of his holy Sacraments; In the Name of the Father, and of the Son, and of the Holy Ghost. Amen.

The original authority for this channeling of God's grace, via the Body of Christ and its ministers, comes directly from the lips and acts of the healing Christ Himself, as His words and actions are recorded in the twentieth chapter of the Gospel according to St. John. During His dramatic resurrection appearance on Easter night, says the evangelist, "he breathed on them, and saith unto them, Receive ye the Holy Ghost: Whose soever sins ye remit, they are remitted unto them; and whose soever sins ye retain, they are retained." It would be a presumptuous

limiting of God's power to assume that He could act only through His Body the Church. But in the light of the Bible and of two thousand years of Christian history, it would be equally presumptuous to assume that this channel is not the *principal* channel.

In any event, since this world is obviously a sacramental one, and since the risen Christ patently chose His Church to be a prime vehicle of the outward as a literal conveyor of the inward, the open-minded man who, in conjunction with the best that medical science can offer, seeks the Church's ministry of healing in his hour of illness is the man most likely to be made whole again. Meanwhile, one fact is worth reiterating; namely, the *form* of his coming is less important than the fact that he *does* come.

Consider, for example, this matter of confession and the sacrament of Penance. Some penitents, comfortably at home kneeling before the screen of a confessional box, make their peace with God in this formal fashion. Their spiritual needs are hereby fulfilled, and their brimming cup runs over. Other men, also using the tradition of auricular confession, will reveal a facet of their behavior in need of further discussion outside of the fairly static confines of the orthodox confessional box. To them, the confessor may conclude his counsel by asking that the point at issue be further discussed in his office at a later moment.

But there are still millions of other men, reared in the Protestant tradition, who would be understandably uneasy at the screen of a confessional box, or even at the side of an altar rail. They would almost rather remain sick and keep the innermost thoughts of their hearts bottled up, than cleanse a troubled conscience in this fashion. These are the uncounted millions for whom the pastor's study is the fitting confessional, once they

realize that God doesn't care *where* the floodgates break, as long as the stoppered heart is at long last gladly opened.

For the sake of many of the sick and troubled who may chance across this book, let it be quickly acknowledged that the proud heart is reluctant to reveal its secret recesses. Therefore, the patiently silent counselor across the desk from you is expecting you to employ some tentative gambits. He expects you to engage at first in some gingerly explorations, in an effort to find out just what kind of person he really is. Will he understand? Is he easily shocked? Will he be judgmental or permissive? Can he receive the unpardonable sin? (Parenthetically, many troubled souls are convinced that this is precisely the sin they *have* committed).

You can be at ease, for he is at ease. He knows the stuff of which human nature is made, for he is one with you. His priestly authority in no wise places him even one iota above the battle. He's in the thick of it himself. Meanwhile, he expects that at least the first half of the counseling session will be spent by you in parrying and thrusting, backing and filling, feinting and side-stepping, until you are finally certain that he is a trustworthy repository for your confidences. I assure you that he truly is; otherwise he would not be in his present position.

Having bounced and darted all around Robin Hood's barn, you now suddenly find yourself relaxing and pouring out the true facts of your own self-examination. But you instantly discover one salutary difference between the silent and self-contained evaluation of yourself as you first jotted it down in the secrecy of your closet, and the way it shapes up as you currently verbalize it. It's almost as though, at this juncture, the counselor were an unmoving (but far from unmoved!) backboard against which the tennis enthusiast practices his shots. The wall passes no judgment and makes no comment. Rather, it is the player who, with each succeeding stroke of the racket, is making his

own comments and judging his aim and his goal, all the while making corrections as he goes along. It's the difference between a practice session on paper and one on the practice court itself.

Many a time a counselee rises in genuine gratitude from his seat across from the counselor, and says, "You'll never know how profoundly thankful I am for the sound advice you've just given me," when the counselor, throughout the entire hour of the initial session, has done nothing more than show his all-absorbing empathy and occasionally nod his head! In short, the good counselor is an expert in the well-nigh lost art of listening.

But after you have completely unburdened yourself by the end of the third or fourth meeting, has your burden been really lifted from you? It is not enough that the heart be emptied of the corroding poisons of guilt and resentment, for this is the point at which we return to the business of not leaving the heart empty. Love cannot operate in a vacuum. The empty heart is a hungry, searching heart. And unless love has nourishment to feed upon, it becomes a hollow mockery.

Having acknowledged your resentment and unblinkingly faced the honest reason for your guilt, you are ready for your penance. If the counselor is worthy of his calling, he will possess the insight to link your penance with Christian love on the level where you most stand in need of it.

Let's suppose that you have been resentful of your son-in-law. He is a vulgar, shiftless oaf and therefore totally unworthy of your daughter. You tried gently to point this truth out to her, but she coldly rejected your sacrificial love and moved defiantly within the circle of her husband's selfish arms. *And the longer you stood by in helpless hatred, the more crippling became the effects of the arthritis upon your innocent body.*

To make matters even more infuriating, you know that you're not one of those nagging, smothering in-laws. You're

objectively justified in your estimate of the young man who is slowly dragging your formerly considerate and lovable child down to his own crude level of thoughtlessness. Except for a stubborn few of her husband's friends, everbody in town freely grants that, spiritually as well as socially, your daughter has married beneath her station.

But now, in the very face of all these damning facts, what does your counselor have the effrontery to give you for a penance? You can hardly believe your ears.

"How often," he asks, "do you pray for this son-in-law of yours?"

"*Pray* for him?" You are so aghast at the question that you can scarcely control your voice. "I wouldn't pray for *him* if he were the last man on earth!"

"But that's just the point. As far as you're concerned, he *is* the last man on earth. You feel that he, of all men, is least deserving of your consideration. This is precisely why he needs your prayers. Let's suppose that every single charge you level against him is not only true, but is a gross understatement. In that event, can you think of anybody who stands in greater need of your prayers?"

"I do pray daily for my daughter, of course."

"Of course. It's easy to love the lovable and to pray for them. Go on keeping your child in your petitions, naturally. But it's the *un*lovely and the lov*eless* who are really the loneliest people in the world. They're the ones who stand in the most desperate need of the accumulative impact of our heartfelt petitions."

"You're asking something humanly impossible."

"The humanly impossible is exactly what Christ gave us the power to make divinely possible. In asking this penance of you, I'm only asking what He asked first. If you don't pray for your enemies, you're not getting far in praying for your friends. God knows this man has cursed you and despitefully used you. He

may even at this very moment be ruthlessly toying with the life you love most in all the world. But that's the very reason he needs all the love this new heart of yours can muster up. It's the lost soul who requires the larger part of our prayer life, not the saved one."

"It's all so new . . . I don't think I can do it."

"Then I don't think I can mediate God's absolving forgiveness. You say you're penitent, and I believe you. But you don't want to *do* anything—at least, nothing constructive—with your new spirit of repentance. You want freedom from guilt without a price tag attached to it. Meanwhile, you're perhaps forgetting that, even in the worst cases, the fault is never entirely on one side."

"But this is a breath-taking suggestion of yours."

"Of *Christ's*."

"But I'm afraid I'm not ready for it yet." You were pulling out all the stops in your frantic effort to avoid meeting your commitment head-on.

"Of course, you're afraid. You're being asked by your Lord to launch out into the deep, when it's much safer in the shallows near the comfortable shore. . . . And of course you're not ready. No man ever is. If we waited until we were completely ready, we'd never get *anything* done in life. But even a baby soon discovers this business about having to crawl before he can manage to walk—and then he still falls down and gets banged up again and again."

It was the most difficult affirmation you had ever been called upon to make. However, you finally accepted your penance with good grace. The counselor then asked whether you'd like to receive God's absolution in the midst of the more formal surroundings of the high altar. But you felt rooted to your chair and desired nothing so much as to be forgiven as quickly as possible, whether the blessed cleansing were to be imparted for-

mally or otherwise. So the priest rose and, standing over you, uttered the age-old words:

> Almighty God, our heavenly Father, who of his great mercy hath promised forgiveness of sins to all those who with hearty repentance and true faith turn unto him; Have mercy upon you; pardon and deliver you from all your sins; confirm and strengthen you in all goodness; and bring you to everlasting life; through Jesus Christ our Lord. Amen.

Lastly, the priest counseled a dash of informality in your prayer life itself. If you encountered continuing trouble in fulfilling the terms of this penance, total rigidity of practice should be avoided. Your petitions, he said, were not to be confined to those formal hours when you knelt in your parish church or at your own bedside. God also wanted those silent, but spontaneous, utterances which would suddenly occur to you at the grocer's or while riding on a bus or in the middle of a subway jam—and certainly when coming lovingly into the presence of your daughter and son-in-law.

Since your launching out upon this new way of life is taking place concurrently with the writing of these words, it is obviously much too soon to try to measure the degree of improvement in your physical condition as an indirect result of a change for the better in the condition of your soul. However, as an encouraging example of a blessing which may also be yours in the near future, your counselor has just given you a mimeographed sheet of paper, on which is recorded the story of a woman whose case was somewhat similar to your own.

This woman was a highly qualified New York State schoolteacher who, while in the poisonous possession of a rankling resentment, began to contract what all too quickly became a case of rheumatoid arthritis, so severe that the specialist ultimately pronounced the patient beyond the help of physical

medicine. Here, then, is a story for you to read with a sense of expectancy and, in a mood of imperative thanksgiving, to be heartened by.

It is by no stretch of the imagination a melodramatic story. The woman's recovery is apparently permanent, having thus far lasted for several years without any relapse. But it was far from being instantaneous; and in that sense of the word does not fit the classical definition of a miraculous healing. But it is this very lack of the element of the melodramatic which quietly serves to point up the spiritual character of her complete rehabilitation. This, in substance, is the tale of her common sickness, and her own record of her attested cure. Make of it what you will. But be certain to mark well the moment at which the woman's pain-racked body ceased in its downward spiral. Here is her own written account:

"Onset of disease slow, and actual time of first pain not remembered. There were times of creaky joints and stiff ankles long before the condition became severe enough for me to pay any attention to it. Had some pain in thumb in September, 1946. Swelling and severe pain developed in both feet in January of 1947, and became almost crippling by the end of the following month.

"In retrospect, I now realize that the disease was precipitated by—and came in conjunction with—a situation which had angered me beyond bearing, but which apparently could not be altered. So my bottled-up resentment smouldered and flared, and flared and smouldered. Continued with my school duties, but was in constant misery and scarcely able to walk any longer. Then swelling developed in both hands, to the point where I could hardly hold my bus fare or turn a paper.

"Early in March of 1947, having already been treated by two doctors, with no help resulting, I went to Dr. ———, who specializes in arthritic cases. Sedimentation rate clearly indi-

cated the presence of rheumatoid arthritis to a marked degree. He treated me first with intravenous vitamin C, then switched to the gold treatment.

"There was little change in my condition, although at times I felt better and at other times worse. The swelling and pain spread to my wrists, shoulders, and knees, one area becoming a little less painful as a new area developed. All through this period my sleep was disturbed by the pain and by extreme tenseness. I often awoke, grinding my teeth and feeling tension in my jaw and arm muscles. Had one repetitive dream, varying in details but fundamentally the same—filled with nightmarish vengeance and hateful acts.

"Continued treatment with Dr. ——— for more than two years until, in April, 1949, he announced that my spine was now becoming severely involved, and that he didn't know what else to do for me. The prognosis, he said, was 'continued crippling' until I would probably be bedridden.

"Not long before this statement, I had received an article in the mail dealing with the psychosomatic angle of arthritis, telling about a woman whose brother had cheated her of some money. Arthritis developed rapidly and was relieved only after she saw a psychiatrist. Since this case paralleled mine very closely, I was impressed and interested. Then the secretary of one of the physicians in the same office with my doctor, a girl who had been a pupil of mine many years ago, asked me to read Menninger's *Love Against Hate,* which I followed with his *The Human Mind,* and Agnes Sanford's *The Healing Light.*

"By this time I was convinced that my help lay in religion. I knew that a psychiatrist could probably have helped me with my emotional troubles. But no two cases are exactly alike. In my own case, I figured that my body was involved in the *third* place because my emotions were involved in the *second* place, but that my soul was involved in the *first* place.

"So I began to read the accounts of Christ's ministry of healing and noticed how often the sick person's sins had to be forgiven before he could be made well again. Also the Collect for the Twelfth Sunday after Trinity, 'Forgiving us those things whereof our conscience is afraid,' had made a deep impression on me. I put first things first and finally realized that I must go to confession and free my spirit of my hatred and guilt. Did this in September, 1949.

"There was no immediate relief. However, the teeth-grinding at night stopped and the nightmare has never returned. *And the downward progress of the disease stopped.* No new areas of pain developed and gradually, month by month, both swelling and pain began to disappear. I continued daily Bible readings and prayers, particularly the prayer beginning, 'Almighty God, who art the only Source of health and healing, may we permit Thee to give us health and strength and peace.' On Christmas Day of 1949 I read the passage in Matthew, 'According to thy faith, so shall it be,' and became utterly convinced that I would be well, especially since I had forgiven the person who had unjustly treated me.

"Recovery was slow but steady. I don't know the exact date when the last swelling was finally gone—but by the end of the summer of 1951 I was free of all pain and still am, as I jot down these notes on March 2, 1957. The only mark left of the disease is in the bent shape of the big toe on my right foot. I do get stiff easily and have a rheumatic twinge occasionally, just as any older person does, but I 'pay them no mind' and rejoice and give thanks for my recovery!"

VII. WHEN YE PRAY, SAY, OUR FATHER

AS I HAVE ALREADY SOUGHT to demonstrate, prayer is the keystone in the overarching ministry of healing. And at the very center of that keystone is the fact that the God to whom we address ourselves is, above all, a Father. If He were the thunderbolt-shooting sovereign of Marc Connelly's *Green Pastures,* or the spine-chilling and predestining arbiter of John Calvin, or the mechanists' deity who once wound up the universe tightly like a clock, and is now absently letting it run down until it slows to a grinding stop, it would be one thing. But the God of the Judeo-Christian tradition is neither a wrathful and vengefully capricious master, nor a puppet-pulling prince, nor yet an insensate absentee owner. He is our Father, and we are His children.

Furthermore, He is the kind of Father who, through His Son, has said, "If ye then, being evil, know how to give good gifts unto your children; how much more shall your heavenly Father give the Holy Spirit to them that ask him?" (St. Luke 11:13). An earthly father, however evil his generation may be, is constantly seeking to give good gifts to his children. Within the confines of what his pocketbook dictates, he gives them what money can buy.

Above all, if he's a good father, he is dedicated to giving his

children what money *can't* buy. Even the delinquent is the recipient of this limitless caring. As a matter of fact, because the erring child needs more of his father's concern than does the model child, he evokes more and he gets more. As the rain falls upon the just and the unjust, and the sun shines upon the evil no less than upon the good, so is a good father's compassion for his children. In his truculence, the juvenile delinquent may reject this love, but that fact does not stop its continuing to be poured out without measure, brimming and spilling over. So is it with our *heavenly* Father and His gift of the Holy Spirit.

Love, by its very nature, can never be forced. Where love is concerned, an enforcement is a slavery. Love's emancipation proclamation was once and for all signed by God in the gift of free will to all of His children. Men can therefore accept or reject; respond or maintain a stubborn silence; co-operate or throw up roadblocks in the way. In either case, like the Figure in Francis Thompson's *Hound of Heaven,* God in His love pursues us. The delinquent, juvenile or hoary with age, will remain under the shadow of the Father's wing whether he wants to be so overshadowed or not. It's a love that will not let him go, but it's the fragmented love of a broken relationship.

Even the Prodigal Son came to realize this fact. Truculently he had demanded his share of what was being held in trust for him, and freely the father gave, for it was the boy's rightful share. Except for the son's ill-mannered approach to his parent, there is nothing wrong in the picture thus far. But then he chose to turn his back upon his father. In the country far from home, he heedlessly wasted the entrusted substance in riotous living. It was not until, drained of all he possessed, he sat one day in a pigpen sharing the husks of the swine, that he came to himself. Then it was that the truth dawned upon him. A loveless life, away from the father's home, was no life at all. Flinging from himself the last tattered shred of his pride, he planned

to throw himself at his father's feet and humbly accept the role of a hired servant. But he found his father waiting with outstretched arms to meet him more than halfway. And before he could recite the sentence about his willing servitude, he found himself forgiven and in the center of a royal reception. So it always is with the prayerful act of penitence, which alone can redeem a life and heal a broken relationship.

Parenthetically, the Elder Brother who had remained at home, smug in his dutifulness, turned out to be a blue-nosed prig. He had, in the midst of his father's household, gone through all the motions of responsive love, but ultimately revealed himself as resentfully loveless. There is no record whatsoever that the Prodigal, during his stay in the far country, had associated with prostitutes. But the Elder, promptly suspecting the worst, accused his brother of harlotry. His unfounded charge, which was the spontaneous outburst of a mean mind and a biting tongue, served only to reveal that he was probably jealous of his free-lancing brother. One hopes that the Elder learned the priceless lesson: namely, as there is no virtue in breaking the God-and-man relationship in a far country, neither is there any virtue in breaking it complacently at home.

The petition which fails to approach the throne of God humbly, with the petitioner penitently beseeching to be forgiven his own shortcomings, and equally ready to forgive others *their* shortcomings, is both a petition and a petitioner unworthy of the name. The Gospel, incidentally, contains not a syllable justifying resentment of the evil others do unto us. It is concerned only with the good that we were created to do unto all of the other sons and daughters of the same common Father.

The central petition of the Christian religion is the Lord's Prayer. And the pivotal word of that prayer is a tiny conjunction, upon which the effectiveness of our petition stands or falls. It is the word "as." It provides the great proviso. "Forgive us

our trespasses, *as* we forgive those who trespass against us." We empower God to forgive us our shortcomings, only *as* we forgive others theirs! Or, to put it another way, God's forgiving power becomes fully effective in our relationship to Him and to our brothers *as* we first penitently seek His forgiveness of our own sins, in terms of our having gladly forgiven the sins of another against us.

This is the first law of love, in relation to which everything else in a man's prayer life is peripheral. The Prodigal Son was a fool. But at least he was not a *loveless* fool. He was truly sorry for the evil he had done, as well as for the good he had left undone, and in his newly-healed relationship he honestly intended to make amends. Therefore, his father gladly forgave him. And in the Prodigal's mood of repentance and thanksgiving, it is safe to assume that he forgave his surly brother. The Elder, on the other hand, had not been so egregious a fool as the Prodigal. In fact, he was quick to remind his father that he had always been most respectable. But it had been a *loveless* respectability, which is why, unless he had executed the turn-about-face known as conversion, the Church could never have absolved the Elder of his sins. God Himself cannot cleanse the man who stubbornly insists upon remaining soiled.

This all-compassionate and forgiving love is the touchstone at the core of every act of spiritual healing. It is a truism to say that love helps to heal. But it inevitably does. This is the prime reason why, at many healing services around the world, particular prayers are offered week by week for specific hospitals in the city or throughout the surrounding countryside. These repeated petitions are largely directed on behalf of the physicians, surgeons, nurses, and other members of the staff, whether or not they may happen to come in contact with the sick themselves. A wrong atmosphere is always a destructive atmosphere.

Once, in the stubborn presence of a demonic influence, Jesus

warned His disciples, "This kind goeth not out but by prayer and fasting" (St. Matthew 17:21). The fasting herein referred to is not concerned with the strictly limited diet to which the patient is restricted just prior to an operation, but rather with that bodily abstinence on the part of the petitioner which can wonderfully make for spiritual alertness and sensitivity. The prayer is then more likely to pierce the veil of the sick man's deepest and most hidden needs, and to sustain him at that level where he most desperately requires to be held up.

But fasting or no—and whether the patient is immediately involved or not—the practice of regular prayer is one which can often best get at those disruptive influences too subtle to be dealt with by sweet reason. Not only do many surgeons, faced with a panic-stricken patient, call upon the pastor or chaplain to seek to reach the threshold of the sick man's subconscious, which is immune to reason, suggestion, or moral suasion. Uncounted physicians and hospital superintendents have lately been also specifically asking for the prayers of a loving congregation, especially at some critical hour in the wards or upon the operating table. Such prayers can have a measureless effect in bringing love to a corridor where only a sterile brusqueness existed before, as well as compassion to the heart of a doctor whose competence in the physical field of medicine goes unquestioned.

Pills have always played a prominent part in the recovery of the sick. But many people—many more than we apparently seem sometimes to realize—must be *loved* back to health. To this end, the prayers of love can have a keener edge and a more penetrating power than the finest knife in the surgeon's instrument case. A nurse with a heart as sterile as her gown would be nurse in name only. Her hands might be antiseptically scrubbed until they turned red, but unless their movements were prompted by a heart ever ready with compassion, they might well become literal purveyors of death.

Prayerful love, on the other hand, is the purveyor of life, both here and hereafter. Its techniques are varied, and they operate in many ways and upon many levels. But for the faithful beginner, a simple discussion of certain basic factors in the practice of prayer may help to clear the air. These primary factors make themselves forever felt, whether you are praying for yourself, for a beloved friend, for your worst foe, or for the total stranger within your gates. Here, then, are the main points involved as we prayerfully seek for healing.

(1) In the human and divine interaction between God and man, genuine prayer is the most practical, effective, and real element in the world. And to genuine prayer, there are always two parts: the loving petition, and the ultimate willingness to bow gladly before a wisdom greater than our own. The petitionary part is the purely human part, governed by nobly selfless love or by ignobly selfish desire—or by something in the gamut in between, such as hope or fear or common cowardice.

Using Gethsemane as our divine example, the sick-at-heart Jesus naturally hoped that the necessity for Calvary might somehow be avoided. So He understandably begged that the cup of agony might pass from His lips. But as we now know, the world would have been infinitely the poorer had Jesus, under the impact of a terrifying crisis, taken to His heels in full flight from the Garden on that fateful night. However, He didn't. Instead, He moved swiftly on to the second half of the perfect prayer. "Nevertheless, Father, not my will, but thine, be done." And universal healing at its highest level was thereby made possible.

If a man is concerned only with imposing his own momentary will upon God, come what may, he'd better give up the practice of prayer. The two-way relationship between the Father and His children is never possible on a bargain-basement basis. The supreme Ruler of the universe is not to be idly or

selfishly manipulated for any person's private improvement. At the same time, when a man says his prayers, he actually changes the situation with which the Father has to deal. As L. Harold De Wolf, of Boston University's School of Theology, has put it, ". . . What was the best He could do for me or for my friends before I prayed may still be the best now in this changed situation. But it may not. God must confront many and complex considerations, concerning the need for maintaining a reliable order of law, the need for teaching us all our dependence upon each other and upon Him, and many other matters known or unknown to us. . . . We cannot know, when we pray, what the results will be—whether pleasure or pain, health or illness. But we can know that in the coinage of eternal values, the best that God can do for us and others is better when we pray than when we do not. If we pray that the cup of agony and death be removed and it is instead given to us, brimming over, there will still be greater redemptive power in the agony *after* prayer than in long life *without* prayer. . . . Every true prayer implies, if it does not make explicit, the spirit of Jesus' words, 'not my will but thine be done.' For it would be superstitious effort to practice magic if we sought to impose our wills upon God. . . . God may not give what we ask, but He will give better gifts to us and our fellows when we ask than when we do not."[1]

In short, the will of God is not, of necessity, automatically *our* will. Consider, for a moment, your own child. Loving him deeply, you want him to be happy. But you also want him—even more importantly—to be honest. And a person, he soon finds out, cannot always be happy and honest at one and the same time. It may be a bitter lesson to learn, but your child ultimately discovers that it can literally *hurt* to be honest. Unless he finally learns that lesson, all other lessons are wasted. But if

the small child trusts his parents, he will also learn to abide by the deeper wisdom implicit in that loving parenthood.

(2) There is nothing in either the Old or the New Testaments, nor yet in two thousand years of Christian history, to prove that a proper relationship with God in prayer will make the petitioner healthy, wealthy, and wise. This is a simple truth which deserves to be taken to heart by the man on his knees, despite the glib mouthings of certain popular pulpiteers. To spout mealy mouthings anent religion as nothing more or less than a toll-free parkway to the pot of gold at the end of the rainbow is to blaspheme the stark record of Christ and of many of His most faithful disciples across the ages. As De Wolf says elsewhere in *Healing: Human and Divine,* ". . . Neither a righteous life in general nor prayer in particular offers an easy road to health and prosperity. Many persons, including Jesus of Nazareth, have suffered violent emotional tension, physical agony, and early death, not in spite of their piety but precisely *because* of their righteous prayers. . . . The tense agonizing of Christ in Gethsemane or the strenuous utterances of Paul bear little resemblance to the peace of mind which many sermons promise as the fruit or the essence of true religion. . . . Petitionary prayer may not bring health, wealth, or pleasure, but pain, privation, and lonely sorrow—as it did for Jesus. But because prayer is according to God's purpose, it heightens the best possibilities for us."[2]

It is everlastingly important to be certain that you have not, in your earnest petitions, so hedged the Father about with provisos of your own making that you unwittingly end up by sheepishly finding yourself praying to a deity so small that He is unworthy of your attention. Theodore Ferris has incisively phrased it in telling fashion. "Let your faith be so great that it will not simply be faith in a God who will do what *you* want done—however laudable your desires may be—but rather faith

in a God so great that He will enable you to do whatever *He* wants done *in* and *through* you."

In other words, He has done you the supreme honor of inviting you to share in the maturing of His as yet imperfect and unfinished Creation. This is His world, not yours or mine. And because the law of love is the perfect law, the last word must be His, not ours. In sickness or in health, He has saluted you by choosing you as a channel of His grace. Maybe you dream of serving Him from an elevated chair of royalty. That's a perfectly human and understandable desire. But the truly prayerful man concludes with the words, "If I can't serve God from a kingly throne, with a sceptre in my hand, I'll serve Him—if need be—from a bed of pain, with a Cross in my hand. But wherever I am, I'll serve Him, and I'll try to encourage the brethren around me to do the same!" A God big enough and loving enough to care about your needs is a God sufficiently great and compassionate to meet those needs—if you will let Him.

(3) Don't insult God. It's true that nothing is so trivial as to be beneath God's concern. And there's an old Methodist hymn which advises that if you are troubled by *anything,* just "take it to the Lord in prayer." But since we are sentient beings, possessed of the gifts of free will and a reasonable amount of intelligence, there are certain simple areas in which God surely expects us to act on our own.

To take a deliberately elementary example, suppose you foolishly undertook to try a physical experiment upon yourself. As Francis Woidich, a Washington, D.C., physician, suggests, "Let's say you took a string and tied it tightly around your finger. What would happen? You wouldn't be changed spiritually, or changed emotionally, would you? But you would be changed physically. The blood would stop flowing into that finger. Physical energy, the crudest kind of energy we live by,

would stop flowing into that bound finger. And in a very short time it would become gangrenous. It would rot and die. Now I don't think a healer or a prayer group should kneel down at that point and say a prayer for you. You needn't even say a prayer for yourself. *The thing to do is to untie that string!"*

Prayer on this primitive level is necessary only if it is clear that the bodily disability has apparently come as the result of a twisted mind or a thwarted spirit or an unwitting misuse of the God-given gift of free will. In such instances, a prayer like the following will be one which moves in the right direction. "Our Father, I do beseech Thee to redirect the thoughts of my mind and the movings of my spirit, that all disabilities therein being thus corrected, my body may also be cleansed, and that I may therefore thankfully receive that gift of total health which it is Thine alone to give, through the presence in me of the healing Christ."

So we do not insult God by taking to Him those problems whose solutions patently lie within the competence of our own intelligence to handle. But neither do we seek bodily cures until we have first faced the possibility that the disaffections of the flesh may have their roots in a disaffected soul. A petition for the healing of the body which forgets to pray also for the healing of the soul is as inadequate as putting a skin poultice over a cancerous area, when the cancer is buried deep within the body and therefore needs internal surgery.

By the same token, to quote Dr. Harry Taylor, "The healing of the body is at best merely a temporary cure between birth and inevitable death, the ultimate cure being always of the spirit. We must always first be willing—sometimes as an actual prerequisite to bodily healing—to let the body die." Taylor notes that the Old Testament tale of Abraham and his beloved son Isaac provides a classic instance of the practical operation of this principle. Only when Abraham was willing that the child

Isaac should die, if need be—the Isaac whom he loved more than life itself—was it possible for his son to go on living physically, and himself to begin living spiritually in a new dimension.

This principle is especially applicable in the cases of wasted and withered old people who are dying of nothing more or less dramatic than the senility which finally overtook the Deacon's one-horse shay, causing every part to collapse all at once. When a noble old matriarch of, say, ninety is beginning to lose the normal functions of her fleshly organs, one by one, prayers for physical healing are perfectly permissible. It is no more than natural for us to want to cling to the outward, no less than to the inward, frame of those whom we love and who love us. But it is part of the *super*natural to be also concerned about that which goes *beyond* the natural. Prayers for the old lady's mortal body should not preclude prayers for her immortal soul. And the more the body decays, the more the soul swims into immediate prominence.

A good death is no less important than a good life. Having a hopeful entrance into life should not preclude prayers for a triumphant exit from it. Bishop G. Francis Burrill has said, "The grace to die willingly and in confidence that God's will is ultimately to be done is often as great a gift as physical healing, and is a gift which each of us will need as we prepare to die." As you prayed for her physical strengthening back in the days of an earlier sickness, so you pray now for her spiritual strength in this day of a later, and perhaps final, sickness.

In fact, so strong is the power of prayer that if you concentrate solely on bodily rehabilitation, you may well be doing the dying old lady a distinct disservice, by beseeching God to make her linger longer than is needful. It is a tragic waste of spiritual influence to fasten all of one's attention upon the battered old house, instead of upon the immortal tenant who is

about to leave her no longer habitable dwelling for one of many mansions elsewhere.

On the more affirmative side of this subject, bodily cures are likely to be achieved at a faster pace when you make it a point to concentrate primarily upon our Lord, rather than upon the patient himself. It is Christ's love, and not the patient's pain, which deserves to fill your heart if you are to pray most effectively for him. If you happen to be an active member of a loving congregation anywhere, be sure to inform them of this crisis in your own life, or in the life of him for whom you are praying. Then, when you leave the group, bring the power of the invoked Presence with you. It's not supposed to remain piously within the walls of the church. When the dedicated petitioners file out of the prayer meeting or of the sacramental service, God intends that they shall, singly or in groups, take the dynamic power with them as they go back out into the market place or the hospital room. It was Studdert-Kennedy who once said that if anybody tried to lock Christ up within the sacred confines of the tabernacle in the chapel, He would instantly break through the bronze doors and walk the streets with His suffering children. He still remains localized in the tabernacle, under the guise of the sacred elements, but He is also out among those who have not yet learned to meet Him in the House of His native abode.

(4) There is never any need to *plead* for yourself or for the healing of a loved one, as though God were reluctant to infuse the sick with His healing power and therefore must be implored, in terms of the supplicant's cringing before Him. Rather, it is of vast importance to lift the needy and their need to the highest level of which your petitions are capable. It is not required to give God instructions. He already knows the need, as He also knows your consummate interest in that need. What He does want is your affirmative response to the love which He

is waiting to pour out at your behest. Simply believe that He hears with incredible eagerness, and that He will creatively answer in His own fashion and at His own pace, all to the ultimate benefit of the object of your heartfelt petitions. This belief is not easy, but to doubt its efficacy is to presume to intrude where even angels fear to tread.

(5) Your powers of imagination may be primitive in their scope, but it is of more than merely symbolic value to conceive of Christ's standing by the bedside of the one for whom you are praying, be it yourself or somebody else. Picture Him as touching the patient with His healing hands. This conception deserves to be universally applied. For instance, brave indeed would be the counselor who would dare to offer advice to a penitent without himself first invoking the blessing of the Crucified whose hallmark is the crucifix hanging in the middle distance just above the penitent's head. In the field of spiritual healing, only the presumptuous man acts alone. Furthermore, says Leslie Weatherhead, speaking of the person for whom your petitions are faithfully offered, "Do not pray that she may get better, because that is putting her cure in the future. Believe that Christ is at this very moment touching her life, and that His healing power is being made manifest in her body now."

Furthermore, your ultimate vision of the sick person must be one which sees him or her as totally free of the currently crippling disease. This is the vision of Christ's immediate will for the sufferer. Then, having so visualized the sick, it is of incalculable importance to conclude your prayers with an act of humble gratitude, in the firm conviction that your prayers themselves are helpful mediators of God's ultimate will for the pain-ridden.

(6) In this connection, because our human powers are strictly limited, and also because our usual ability to concentrate has its equal limitations, you will be able to pray more effectively if

you avoid praying for too large a number of people at one time. As was mentioned in an earlier chapter, a healing service may include petitions for as many as twenty-five or fifty individuals. All of these persons obviously deserve to be held up in our petitions, and held up by name. But you have honestly come, let's say, to pray for only one, yourself or somebody else. In that case, console yourself with the probability that other petitioners are praying for other individuals on the list. And certainly, whether your own attention is wandering or not, God's isn't. If, on the other hand, you are a total stranger who has dropped in upon the sacramental prayer group with nobody specifically in mind, but simply as an act of thanksgiving for blessings beyond the counting, then arbitrarily pick some one name out of the blue. Again picture the healing Christ standing by his or her bedside with the touch of love. As you do this, let all of the other names go winging over your head. Be comforted by the thought that you are now doing all that Christ asks any of us to do in His name on behalf of the weary and the heavy laden.

(7) Finally, don't fret if you are unable to bring the person being prayed for into your own presence or into the presence of the priest. This being a sacramental world, it is admittedly always desirable to achieve a tactile contact. On the noblest level of communication, the personal touch is always the sacramental touch. But our Lord Himself more than once healed people at a considerable distance from Himself. They were physically out of His earthly sight, but never out of His eternal care. Personal absence need never be a barrier to healing. Christ is not dependent upon visible faces and localized places.

Meanwhile, under any and all circumstances, never forget that the love of Christ is a persistent love and is not easily thwarted. For many a sick man, the difference between recovery and death lies in the difference between the degree of

love being offered, or the degree to which the proffered caring can be received. Perhaps not many men are willing to die for love—but uncounted thousands die daily, the world over, for *lack* of love. So let neither distance, nor conscious rejection, nor yet your own inadequacy, stand in the way of your personal oblation—that is, the outgoing and prayerful gift of yourself in the name of that love.

(8) Above all, if you believe in the all-pervading love of Christ, and if your prayers for yourself and for others are all framed within the context of that love, you need never become the victim of anxiety. Anxiety is a poison as virulent as any in the pharmacopoeia of chemical science, and it's highly contagious. That's why our Lord says, "Be not anxious," and why the prayerful life which is free of anxiety is the only completely fulfilled life. Contrariwise, a prayer offered in a spirit of nothing but fretful anxiety is a prayer vitiated of much of its power.

Of course, every life is peppered with its worries. The anxieties which nag at us and drag us down are manifold in character. But the subject men worry most about, in this day and age, is their health. And with the massive doses of publicity it is currently receiving, the threat of cancer is the Damoclean sword whose presence causes such anxiety that, for uncounted thousands of souls, it has become an obsessive worry. But this compulsive kind of fretting becomes needless, as soon as a man invokes that spirit of the healing Christ with which this chapter has been dealing. When he does this, as an act of faith, he instantly changes the focus of his life from himself to the ultimate Source of all healing.

To emphasize this point, in the words of Theodore Ferris, "Health is precious, let nobody ever deny that, more precious than fine gold. But life is more than health and there are people who have not had good health who have had good lives, creative and wonderful beyond our imagining. And there

is something even more important than life. You may not think you believe it, but you do. I would be willing to venture almost anything that at some time or other in your life you have said, There are some things I would rather die than do. And I am almost sure that sometime or other in your life you have said, There are some things I would go through anything to be. In other words, there are some things that you care more about than you care about life itself."

Meanwhile, God has so organized His world that the moment you shift the center of your interest from yourself and your anxious concerns to Him from whom all health comes, and from whom the very breath of your life, with its manifold blessings, is derived—in that moment your anxieties will miraculously start to drop away from you, one by one, until your neurotic fretfulness about the morrow will no longer be anything but a fast-vanishing memory.

Once you have thus shed your anxiety, both you and the object of your loving petitions will have a better chance for wholeness of body and of mind and of spirit. For, knowing the kind of healing love the Father generates in those who permit Him to do so, you will then more trustingly recall that imperative instruction which goes like this: "When ye pray, say, Our Father. . . ."

VIII. TARRY... UNTIL YE BE ENDUED WITH POWER FROM ON HIGH

YOUR FIRST INTRODUCTION to the world-famous shrine city of Lourdes proves to be as offensive to the sensibilities as you had probably always heard it would be. Laid in a perfect gem of a setting in the south of France, with the snow-capped peaks of the Pyrenees towering around it, Lourdes looks from the train window like the same village it must have been back in 1858 when the fourteen-year-old peasant girl, Bernadette Soubirous, had her vision of the Virgin Mary. And I suddenly felt ashamed of my original reluctance to make this last leg of my spiritual healing pilgrimage in 1957. But distance lends its usual enchantment, for hardly is the railroad station out of sight behind you than your worst fears are realized. The gross commercialism and the unbridled superstition spring suddenly into evidence.

As Paris has its fashion shops, and the race track its betting windows, and the Bowery its uncounted saloons, so this center of religious healing has its endless shops devoted exclusively to the selling of religious articles. In a virtually unbroken line on both sides of the street, these open-front stores shoulder each other along the entire route to the basilica. They purvey sleazy-

looking rosaries, polychromed Bleeding Hearts, "mother-of-pearl" statuettes of the Mother of God, and unbelievably tawdry crucifixes. In fact, it's hard to uncover any item which isn't in remarkably bad taste.

In addition, these souvenir shopkeepers are constantly trying to devise new gimmicks aimed at making money from the grotto's healing waters, without actually breaking the bishop's ban on selling it. They shrewdly offer specially boiled candy "guaranteed to be made of Lourdes holy water." For an extra twenty-five cents, you can purchase a rosary into one of the beads of which some of this holy water has been allegedly injected. And they sell hollow crucifixes brimming with the water, as well as plastic flasks to be filled by the purchaser himself at one of the many faucets from which the grotto's waters run.

This is the first impression which the shrine city offers, and it's far from an ennobling one. And you wonder why in Heaven's name you bothered to make an overnight train trip all the way from Paris to visit this apparently overrated town. But just as the unbroken procession of souvenir hawkers suddenly started several blocks back, so does the almost endless line of miraculous-medal shops just as suddenly stop.

You are now on the edge of the outer precincts of the cathedral. Every last trace of commercialism is instantly wiped out; and another kind of procession, also unbroken, is underway. This is the heartrending procession of the crippled, the paralyzed, and the blind—the almost endless line of the incurably sick, most of them slowly dying and some of them already almost dead. These are the hopelessly ill, whom medical science has reluctantly, but correctly, deemed to be beyond the power of physical medicine to cure. Yet there is a chance that one or more of these dying thousands being borne to the grotto today will, before nightfall, have been instantly and miraculously healed.

A vast muttering, reminiscent of the poet's "murmur of innumerable bees," fills the air. This all-pervading sound does not rise from the lips of the sick. For most of the ill, if not already comatose, have had to travel too far into the valley of the shadow to summon forth audible speech. Rather, it emanates from the lips and the hearts of the priests and the nuns and above all, the *brancardiers*. These last-named are the stretcher-bearers, the indefatigable pushers of wheelchairs, and the lay attendants who give ceaseless and unparalleled nursing care to the sick. They are the ones who, at dawn, start preparing the dying for their dramatic journey to the shrine of Bernadette. They throng the hospital of the Queen of Sorrows, ministering gently and lovingly to all those who are to be placed in wheelchairs and upon litters for the breathless pilgrimage to the *piscina* of the healing waters and to the elevation of the Host at the great Mass. They are the thousands who, coming here for a season from some community of love, bring the community's love with them. All day long, they literally bring cups of cold water in Christ's name. All day long, they hold umbrellas over the heads and bodies of the sick, for the sun in Lourdes can be almost tropical in its intensity. And all day long, they help to dress the revoltingly suppurating wounds of the dying.

These hundreds of *brancardiers* are the volunteer helpers who either have themselves been miraculously cured or who, for some other equally cogent reason, have given up their holidays and their annual vacations to serve the sick here at Lourdes as a genuinely Good Samaritan act of undying thanksgiving. They come literally from all over the Christian world at their own expense, and at their own expense they gladly minister for as many days or weeks or months as their time and resources will permit. They are the ones who have learned that outgoing love is its own reward. Some are peasants, and some are ladies and lords of great repute; and the remainder represent every-

thing else which may lie in between those two worldly extremes. In short, these *brancardiers* are the humble helpers without whom many of the physical pilgrimages could not take place. If the shrine is the inward source of the miraculous, these Christ-bearers are its outward mediators.

Some of these tireless helpers are venting their praises in sing-song renditions of the *Ave Maria.* Others are intently muttering endless repetitions of the Lord's Prayer, while still others are running the gamut of prayers signalized by the beads on the rosaries they fervently clutch. And finally, there are those giving impassioned utterance to personalized devotions of their own. All of these mingled sounds, along with what Robert Browning called "the blessed mutter of the Mass," serve to create an atmosphere of healing love perhaps unparalleled anywhere else in the world. Unless a man were a materialistic clod, he could scarcely set foot within the precincts of these sacred grounds and not sense the reality of a Presence so infusing as to be virtually palpable.

These pilgrims, especially the astonishingly compassionate helpers, are the ones who have had the patience to obey Christ's injunction to His disciples after the Resurrection: "Tarry ye here in Jerusalem, until ye be endued with power from on high." They tarried faithfully and gratefully in their own particular Jerusalems—north, east, south, or west—until they *were* endued with power from on high. Then they had the grace to move purposefully out of their own loving community to this community of love at Lourdes, bringing the overarching and undergirding mood of that power with them. It is this ingathering of the Spirit which gives the shrine city of Bernadette its remarkably unfailing air of selfless dedication, a dedication of soul no less than of body.

Nobody comes to Lourdes in a holiday mood. Rather, everybody makes his pilgrimage—whether for himself or for a loved

one or as a helper, male or female—in the mood of an earlier spelling and meaning of that word. They come in a *holy*-day mood. And this feeling of exalted devotion wholly pervades every cranny of the basilica, the grotto, and the baths. Important to note is the fact that the infrequency of the miraculous in no way ever dilutes or adulterates this air of brooding exultation. I saw hundreds of the hopelessly sick thronging the cathedral at the elevation of the consecrated Host, one of the traditional moments when healings most frequently occur. I saw hundreds of other incurables being gently brought forward by the *brancardiers* to be dipped or plunged painfully into the icy waters of the grotto, another moment when startling cures have been effected.

But among the thousands patiently standing, sitting, or being carried in the endless, but always orderly, queues which inched forward all day long, I saw not one evident miracle. In all likelihood, an interior peace was brought to many a pain-racked frame that day, but I witnessed nothing which would satisfy that medical bureau composed of Catholic, Protestant, and non-believing physicians from all over the world. However, what I did unforgettably witness was this serene radiance which transmuted everything it touched within these hallowed precincts.

If, like Emily Brontë in her *Wuthering Heights,* for example, it seems that we are in this book concerned with establishing the imperative of a specific mood—and that we are therefore trying to communicate a sense of atmosphere above all else—the surmise is correct, and was deliberately so intended. The mood of Christian love is not just an outward symbol of something else. It has nothing in common with the mechanically contrived "atmosphere" of a Hollywood film about foreign intrigue.

The outgoing mood of the ingathered love is the very reality

itself, without which pure Spirit does not break clearly through into the human personality. The loving congregation *incarnates God,* and so *mediates* His healing power. Whereas the atmosphere of hateful resentment is destructive, the atmosphere of loving concern is creative. In this specific sense of the term, the mood of Lourdes is sacramental in character, since it unvaryingly demonstrates Christ's loving community in action, and it does so on every conceivable level.

Lourdes itself has been mentioned so often and so prominently, here and elsewhere, simply because—at least as far as this age is concerned—that particular spot has most dramatically demonstrated the power of a mood which it is imperative for all men to possess if they are to become the effective mediators God created them to be. However, let one fact be made unmistakably clear, without question or cavil. Admittedly, Lourdes unflaggingly mediates the pure presence of the Holy Spirit. But Lourdes has no *corner* on that Spirit. Not any man, nor yet any group, has cornered the market on the love of God.

What Lourdes as a loving community has, *your* community of love can have! And it does not need Bernadette with her mystical vision of the Blessed Virgin. We are indeed a peculiar people. We boast of having the tallest this, and the biggest that, and the largest amount of something else. But when it comes to confidence in ourselves as mediators of the grace of God, we suddenly wax uncommonly modest, and our Lord is made to seem very small. In our absent-minded preoccupation with the baubles and gimmicks of our material universe, we apparently forget that the healing Christ is always available and waiting to incarnate Himself, wherever two or three are gathered together in His name.

The miracles of Lourdes over the past decades are a matter of well-attested record. So can the miracles of healing in your own

loving congregation be investigated and become a matter of record. But the *continuing* "miracle" of Lourdes is still that brooding quality of a constantly changing community, bound together by nothing except their mutual concern for the love of Christ and His healing ministry in and through them. And that remarkable kind of concern can be yours and mine, too. As a matter of blunt fact, until the community's mutual love is lifted to that level, the very heavens themselves will remain shut, and the incredible cures will never begin to come to pass.

Meanwhile, this juncture is a fitting one at which to examine the facts surrounding several representative miracles which have been effected, both at Lourdes and in my own experience within the ministry of healing. Since many of these medically puzzling cures manifest the same general characteristics, there is no virtue in listing case after case for the sheer sake of numbers. But the recording of three typical examples will be illustrative of the fashion in which such cures occur. It is still the exception which gives credence to the rule, and at least one of the following cases fails to meet all of the strict requirements of a classical healing via a miraculous intervention of some mysterious nature. But even such a case, because of the spiritual factors which were brought to bear upon the situation, in the face of a hopeless prognosis, deserves consideration and examination. As to the validity of each healing, at least from the point of view of the spiritual, each reader is invited to make his own decision.

As for the cures originating at Lourdes, the two case histories which follow are culled from a remarkable series of well-documented and carefully investigated stories of miraculous cures, as reported by Rhona Churchill in the London *Daily Mail* during April of 1957. In each instance, after checking copies of the medical bureau's exhaustive records, the reporter visited the completely healed individual and secured a personal interview. The

reporting consistently hews to the line of the basic components involved, carefully avoiding any fancy embroidering of the tale for the sake of added drama. And wherever possible, the reporter permits each person to record his reactions in his or her own words. Here, then, is a summary of the first case reported. It is the story of Jeanne Fretel, a peasant girl from the fields of rural Brittany.

IX. THE CASE OF JEANNE[1]

JEANNE FRETEL WAS THE pale and fragile daughter of a wretchedly poor Brittany peasant. For most of the first twenty-four years of her life, she served as best she could at the rough chores of domestic work. Then, in 1939, she suffered an attack of appendicitis. After the operation, complications somehow developed, and instead of enjoying a normal convalescence, she fell desperately ill with tuberculosis of the stomach and of the intestines. A little later the tubercular infection attacked both her mouth and her feet.

For nine agonizing years, the attending physicians fought a losing battle for Jeanne's dwindling life. The savage onslaughts of the tuberculous peritonitis had crushingly won the day, and the doctors were forced to fall back helplessly in the face of its ever-widening attacks. By the time that they gave her up as incurable in 1948, her case history (now on file at the Lourdes Medical Bureau) showed an eye-opening record of eighty pages of hospital reports, eighteen pages of fever charts, laboratory tests, and X-ray data, and thirteen operations.

The pension which the French government granted Jeanne was small, but it did not much matter. She was daily being injected heavily with morphine; she had received the last rites; death would come soon. Despite the maximum doses of narcotics being regularly administered, the dying girl was in

constant pain. That is why Dr. Pellé, chief physician at the Hotel Dieu in Rennes, was furious when he learned that Jeanne's friends had somehow scraped together enough money to send her to Lourdes. It was not simply that Dr. Pellé was an agnostic. Almost *anybody* would agree that it was a cruel business to force the poor girl, already at the point of death, to endure the additional agony of what was sure to be a pointless pilgrimage. But her friends were stubbornly insistent; so the quixotic plan went doggedly through—without Jeanne's knowledge, of course. She had been unconscious when they gently eased her stretcher aboard the train that afternoon; and she was still unconscious when the *brancardiers* manfully carried her to the baths by the grotto the next day.

Seventy-two hours later, the litter-bearers bore her gravely to the Mass for the Sick. Her stomach was grossly distended, and she was vomiting ceaselessly. In her comatose state, with the last breath of life barely flickering within her, she could not even have known where she was. The priest hesitated at making what surely would have been a futile attempt to give her Communion, but the friends who had not left her side whispered their urgent pleas, and the celebrant extended one of the sacred hosts toward her mouth.

In the personal interview which transpired years later, Churchill reports Jeanne's words: "It was then that I recovered consciousness, realized I was at Lourdes and that I felt well and free of pain. . . . I asked to be wheeled to the grotto. I prayed. *Then I felt two hands lift me into a sitting position. I looked to see who it was, but there was no one!*

"Then I felt the same hands place my hands on my tummy. The swelling had vanished. I couldn't believe it. Was I cured? Was I dreaming? Then I felt ravenous."

The next day Jeanne had an appointment to appear before the world-famous *Bureau des Constatations Medicales,* where she was painstakingly examined by five separate physicians.

This bureau, it must be remembered, is sponsored by the medical profession itself, and has no connection with the Church whatsoever. As Rhona Churchill is careful to point out, "Any doctor of any race or creed may examine its files, attend its sittings, and examine pilgrims claiming cures." When the battery of physicians had quite finished exhaustively examining, weighing, and questioning Jeanne, they watched her walk back and forth firmly and uprightly. Then they said, "Come back next year," which is the farthest extent to which they will ever commit themselves, until the patient who has allegedly undergone the miraculous cure has lived an additional twelve months in excellent health and without the faintest trace of a relapse.

When a jolly and totally transformed Jeanne Fretel returned confidently to Lourdes that next year, no fewer than twenty-two physicians were waiting to examine her. Satisfied with what they found in every degree, these doctors reported back to the Lourdes Medical Commission in Paris. This commission is composed of top-flight Roman Catholic and non-Catholic specialists, both French and foreign. They adjudged both the original diagnosis, "tuberculous peritonitis," and the subsequent prognosis, "hopelessly incurable," to have been entirely and obviously correct. As to the equally obvious healing, it was judged to have been instantaneous and complete, with no evidence of any relapses.

So Jeanne Fretel heard the glad words which her healed body and her thankful heart had told her were true a whole year earlier: "*The cure is genuine. There is no medical explanation for it.*"

After five more months had passed, the specialists gathered in solemn conclave in Paris and came once again to the same conclusion. Then, and only then, was the scrupulously careful Church willing to add Jeanne Fretel's name to the list of cures filed under the heading "Miraculous."

In the years which have since passed, Jeanne has never for a

moment forgotten to live a life of profound gratitude. First of all, she promptly undertook the course of study which led to her becoming a trained nurse, so that, both in her native Brittany and at Lourdes, she would more effectively be able to devote her life to God's sick and suffering children. In 1957, when Churchill reported the latest results of the investigations of this woman's case, Jeanne was nursing an old man named Monsieur le Baron. And each year, when her vacation time rolls around, she forswears the kind of holiday which the rest of us might seek. Instead, she returns each summer to Lourdes, accompanying sick pilgrims from here and there and God only knows where else.

It is this element of sustained thanksgiving, incidentally, which may often mark the difference between healings which tend to suffer relapses, as opposed to those in which the cures continue on to ever higher levels of wholeness. It is unhappily in the nature of human beings to accept their blessings as unconcernedly as they accept the air they breathe every living moment. But this heedless take-it-for-granted attitude can have disastrous results where a man's totality of health is concerned. Blessings which are thus taken for granted can never be blessings most effectively used. Nor are they, under these circumstances, likely to abide with any degree of permanence. In this connection, the man who reads his New Testament with the care it deserves can scarcely avoid being haunted by the concluding remark of Christ after He had cleansed ten lepers of their mutilating disease. This incisive story, as recorded in the seventeenth chapter of St. Luke, is reported as follows:

> And as he entered into a certain village, there met him ten men that were lepers, which stood afar off:
>
> And they lifted up their voices, and said, Jesus, Master, have mercy on us.
>
> And when he saw them, he said unto them, Go shew your-

selves unto the priests. And it came to pass, that, as they went, they were cleansed.

And one of them, when he saw that he was healed, turned back, and with a loud voice glorified God,

And fell down on his face at his feet, giving him thanks: and he was a Samaritan.

And Jesus answering said, Were there not ten cleansed? but where are the nine?

There are not found that returned to give glory to God, save this stranger.

And he said unto him, Arise, go thy way; thy faith hath made thee whole.

The record is silent on the subject, but one wonders whether the cures of the nine, who took their new-found blessings for granted, turned out to be as permanent as the healing of the one who graciously made it a point to express his gratitude to the Source of all healing in a concrete act of devotion. If the issue were not a vitally important one, Jesus would certainly not have made so sharp a note of it. Is it likely that the question would otherwise have found its way into an account recorded with extreme economy? Therefore, when the mystery of a relapse, gradual or sudden, does have to be faced, the question of the patient's degree of thanksgiving, or the possible lack thereof, should never be treated lightly.

The reality of a factor such as this is admittedly a subtle one. It is also one which lies beyond the power of medical science to measure in terms of proof. But neither its subtlety nor its elusiveness gives any man the right to belittle the possibility of its crucial importance. All of this is not even remotely to imply that an unthanked God, faced with a thankless steward, will rise in wrathful irritation to smite the ingrate. It is not that God punishes men, but rather that men punish themselves.

The laws of the Lord's creation are writ large, so that even he

who runs may read. If, thoughtlessly or otherwise, a man breaks the rules of the game, he automatically disqualifies himself and suffers the subsequent penalty. There is nothing in the record to indicate that Jesus set out to punish the nine lepers who had apparently taken their remarkable healing as a matter of course. If, as a result of their ingratitude, they later suffered a common relapse, it is rather they themselves who were inflicting the punishment. To break a divine injunction is not necessarily to call forth the fury of a wrathful deity, but instead to pass judgment upon oneself. Meanwhile, in this whole field of man's over-all health, there are so many unknown elements that it certainly is not the better path to wisdom to run the risk of leaving a single stone unturned.

X. THE CASE OF EDELTRAUD FULDA

SAYS RHONA CHURCHILL, writing about a second miraculous healing which she investigated for the London *Daily Mail,* "The Viennese are more sophisticated about miracles than the French. That is why Edeltraud Fulda, the Viennese cabaret dancer stricken with Addison's disease, reversed the normal routine when she went to Lourdes. No one was going to tell *her,* when she arrived home cured, that she had never been really ill. She insisted on being examined by the Medical Bureau *before* she went to the baths.

"Dr. Pellissier, chief of the Medical Bureau, chuckled when she arrived, but pandered to her whim. Which was just as well . . . for within an hour Edeltraud Fulda was on her way to becoming Austria's first and only *Miraculée.* But let's begin at the beginning."

Edeltraud grew up as a singularly graceful child, nimble on her feet, and sparkling with vitality. Since her sister was equally talented, early womanhood found them launched upon a professional stage career as a sister act. They were an outstanding success in the cabarets of Vienna and their fame soon stretched beyond the borders of their native country. As a matter of fact, it was while they were happily dancing their way first through Switzerland, then Hungary and Italy, that Edeltraud began

feeling sharp pains in the general region of her stomach. Realizing that her career demanded that she remain actively on her feet, and also that she had a professional obligation to her sister, she valiantly tried to pay no attention to the stabbing constrictions. But one day in Turin her life as a young dancer came to an end with dramatic suddenness. She completely collapsed.

The emergency operation revealed the presence of a perforated stomach ulcer, a festered stomach wall, and an inflated kidney. After the removal of two-thirds of her stomach, Edeltraud was sent home to Vienna, where she underwent three more major operations in rapid succession. One revealed a serious bladder condition; another was for the removal of an abscess near her kidneys; and the third involved the removal of the right kidney itself.

By January of 1938, no doubt remained as to the nature of the illness from which Edeltraud Fulda was suffering. It was diagnosed as Addison's disease, an infection of the suprarenal glands. Related to the functioning of the kidneys, these glands secrete two vital hormones. Cortical hormone is essential for the proper digestion of food; and adrenalin is the hormone which makes it possible for the blood to pass to heart, lungs, muscles, and brain. It is therefore obvious that, without these two hormones, it is impossible to sustain human life. So the only way for the girl to remain even half alive from this point forward was to replace the body's natural supply with artificially injected quantities of these life-giving substances.

In the course of tracking down every significant detail connected with this remarkable case, Churchill was granted an interview with the eminent Dr. Hans Siedeck, professor of internal medicine at the world-famous Vienna Klinik. Having treated Edeltraud during the worst stages of her mortal sickness, Dr. Siedeck was intimately aware of the girl's hopeless condition. As a practicing Roman Catholic who had endured

much for the sake of his faith back in the days of the Nazi occupation of Austria, he knew something of the depth of the power evoked by religious convictions; but as a physician, he was loath to discuss the spiritual aspects of the case. All he would say was, "Faith can make a big difference. . . ."

However, he freely put at the reporter's disposal all of the medical facts of the case. His comments were brief and to the point. "I first knew Fräulein Fulda in 1947 when she was desperately ill and weighed only 90 pounds. She had been bedridden for years and been kept alive by hormone injections and tablets. She had black spots on skin and tongue, black lines on her hands, low blood pressure, too little sugar, anemia, and extreme weakness. She was wasting away. I saw her every week for a while, but could do nothing for her except increase the hormone dosage. She had all the symptoms of Addison's disease, and I have never known a patient recover from this type of illness and not need hormones. She could eat only minced veal and rice."

By 1950 it seemed clearly evident to everybody concerned that the dying girl had just about reached the end of her earthly life. To everybody but Edeltraud, that is. Her will to live was fantastically strong. She realized that medical science could do no more for her, but she was possessed by the unshakable conviction that if she could only somehow make her way to Lourdes, she would be healed. This conviction, however, was not a belief which could easily be put to the test of action. Not only had the family's financial resources long since been drained away by the girl's extended sickness but, to complicate matters even further, the Roman Catholic Church in Austria did not subsidize the sick who wanted to make a pilgrimage to the shrine city. It scheduled no special trains for the dying, and provided no money to pay for the fares of the poor.

But the community of love would not let Edeltraud down. If

this was her undying faith in her dying hours, her belief would somehow be put into concrete action. Furthermore, her sister and her widowed mother were gladly willing to sell their last earthly possessions, if need be, in order to see to it that the word of conviction was fully translated into the deed of love. It might require an effort of almost herculean proportions to make the fanciful dream come true, but true it would become. So it was that in August of that same year of 1950, Frau Fulda accompanied her dying daughter on the long and rough journey to Lourdes.

The program for the sick at Lourdes follows an unvarying routine. With such large crowds of pilgrims thronging the shrine daily, an orderly rule of procedure is obviously mandatory. First of all, each morning finds the sick being taken from the wards of the hospital or from their private quarters and wheeled to Mass and the Holy Communion at the site of the shrine. Next, they are borne by the faithful helpers to a special spot in the shadow of the basilica, where they are all offered coffee, unbuttered bread, and a cup of water from the grotto spring. Then they are carried back past the grotto to await their patient turn to be immersed in the world-renowned baths.

Edeltraud would have none of this prescribed routine. With scarcely enough energy left to raise her voice above a feeble whisper, she made her unusual desire known to her mother. "Take me to the Medical Bureau first, Mutti. I know I'm going to be cured. If I go there well, they'll never believe I was ever in the state I'm in."

You don't argue with the dying. Frau Fulda may have had her strong doubts about this business of attempting to reverse orderly procedures, but she nevertheless set out to find the bureau. Slowly pushing the wheelchair before her, she trudged here and there and almost everywhere, but in her anxiety and excitement she apparently misunderstood directions, for the

building which housed the famous Medical Bureau continued to elude her. Finally, a kindly Dutch businessman, noting the distraught condition of the old woman and the look of death upon the face of the wasted body slumped in the chair, offered his help. They later learned that this gentlemen made it a practice to journey to Lourdes every summer as an annual act of thanksgiving for blessings heaped upon him in the past. And for the next several days he took on the task of acting as the girl's *brancardier,* wheeling her wherever she wanted to go.

Back in Vienna, years later, Edeltraud told reporter Churchill the remainder of the incredible story. "The doctors at the Medical Bureau laughed when they saw me. But I told them I knew I was going to be cured. I told them that no one in Vienna believed in Lourdes miracles and that I just wanted them to examine me before I bathed."

Although such a breach in the regulations would establish an unreasonable precedent, this wasted creature was the first person in their memory to have made a similar request, and it might make for an interesting experiment. So the attending physicians made the examination and recorded its facts. Only then did the Dutchman wheel her into the long line of hopeful pilgrims waiting their turn at the baths.

Fräulein Fulda continued her story to the reporter. "I really wanted to wait another day. I was scared. I'd heard the baths were terribly cold. Besides, I'd asked all my friends to pray for me on the 13th, and this was only the 12th. But the Dutchman insisted on taking me. I thought once we got there I'd have time to collect my courage. It was like sitting waiting for the dentist, only more frightening. Mother was weeping outside because she knew I dared not even take warm baths at home. I had a fever. My heart was beating. I shivered with cold as the attendant undressed me and put a damp wrap around me. My teeth chattered.

"Suddenly three attendants took hold of my stretcher and I was in the water up to my chin. I thought I'd die, it was so cold. One is supposed to confess one's sins while in the water, but all I could do was cry: 'God, get me out of this!' They never dry you after a bath—just put your clothes straight on. The water dries on you. I emerged in my damp summer frock, feeling oddly well and happy, but I didn't realize I was cured.

"I just went back to the grotto in my wheelchair and thanked God for not letting me die in the bath. Then I horrified my mother by drinking several cups of icy grotto water, when normally I never had a cold drink.... That night I went down to dinner and ate Russian egg, sugar melon, meat, vegetables, and ice cream. I felt ravenous. Then I knew for certain I was cured. I took the hormones for three more days, just in case. Then I insisted on stopping them and have never had any since. On the 17th I went back to the doctors to register my cure. Twelve of them examined me and told me to return in a year."

In Edeltraud's case, the Medical Bureau unanimously decided that she should not be declared miraculously healed until she had been completely well for *four* full years without any marks of a relapse. So after the girl's post-cure examination on that August day in 1950, she returned to Lourdes in 1951 and 1952, and still once more in 1954. Meanwhile, however, it was requested that she have the verdict of the Lourdes Medical Bureau confirmed by a panel of physicians in her native Vienna. Of course, her first port of call upon returning home after the 1950 miracle was the office of Dr. Siedeck.

As she told Rhona Churchill, "He looked thrilled, but said little. He asked me to re-enter the Klinik for eight days of intensive tests. He was too shrewd to get involved in the miracle-process himself. He arranged for other doctors, non-Roman Catholics who didn't know anything about me, to do

the tests. They tested blood sugar content, water, temperature, everything. At first they were friendly; then my story leaked out, and some of them were hostile and sarcastic. One even faked a blood pressure reading and told me I was ill again. But I immediately asked another doctor to check it, and he said I was normal."

Despite their patent reluctance to admit the fact, these physicians could not in all professional honesty do otherwise than to declare Fräulein Fulda completely cured, and to confess that the cure was medically incomprehensible. As the *Daily Mail* noted, "Everything inside Edeltraud was working perfectly normally and without the aid of injected hormones. All the skin discoloration had vanished. Dr. Siedeck couldn't believe it. He still can't . . . quite. You can't expose diseased suprarenal glands on X-ray plates. He is haunted by the thought that he might have made a wrong diagnosis, yet knows he didn't, knows it was the diagnosis every doctor must have made, given so much clear evidence. 'Faith can . . .' he says, when pressed, but he would really rather not talk about it."

The Austrian branch of the Roman Catholic Church was understandably even more conservative than the French, as regards this business of medically baffling cures. So it was not until 1954 that Cardinal Innitzer, Archbishop of Vienna—having exhaustively checked every syllable of the medical records, both prior to the healing and after it—gave the Fulda girl an audience and announced that he would proclaim her case a flat miracle. This fact, however, did nothing to change the mind of the Austrian Church about sponsoring pilgrimages to Lourdes. The Churches in France, England, Ireland, Italy, and Belgium make it a regular practice to provide such hospital trains for the bedridden sick. But the Austrian Church had remained adamant.

As one of many unceasing acts of thanksgiving for her re-

covery, Edeltraud Fulda determined to start fighting for a softening of this stiff-backed point of view. In high places she met with nothing but firm opposition, and naturally she had only her own influence to bring to bear upon the project. But the poet's lines, "His strength was as the strength of ten, Because his heart was pure," have their pointed application here. The thankful heart is a stout heart. Almost singlehanded, the girl was ultimately able to establish the organization and to raise the funds which could provide hospital trains expressly designed for such pilgrimages. And before having to leave the project because of an undeniable need to earn her own livelihood again, she had the joy, over a two-year period, of accompanying no fewer than ninety bedridden pilgrims to the wonderful city of the grotto.

Before taking final leave of the remarkable case of Fräulein Fulda, certain remarks of hers about the baths may serve to invite comment about the remarkable water itself and the treatment of the patients plunged therein. You will recall her reported words, as she lay waiting for the climatic moment. "I shivered with cold as the attendant undressed me and put a damp wrap around me. My teeth chattered. Suddenly three attendants took hold of my stretcher and I was in the water up to my chin. I thought I'd die, it was so cold." And also, "They never dry you after a bath—just put your clothes straight on. The water dries on you."

Hardly the way, one would suppose, to treat a sick person whom you were trying to cure, not kill. But even more eyebrow-raising, to the medical mind, is the character of the waters themselves. From morning till night, day in and day out, uncounted hundreds of pilgrims are immersed in these waters. And these are people with open infections, foul wounds, and suppurating sores. And the waters are changed only twice every twenty-four hours. Finally, as an act of faith at the end of each

day, some of the *brancardiers* actually scoop out a cupful of the water and proceed to drink it to the dregs! Yet there has never been a single known case of transferal of infection. Why?

Let Dr. Francois Leuret, president of the Medical Bureau, give his relevant comments, as recorded in 1948 in the French religious journal, *La Croix:* "The unhygienic conditions of the Lourdes baths have recently been attacked in the newspapers. Although the waters are only changed twice a day and hundreds of sick bathe in them, many with suppurating wounds or contagious diseases, never once in ninety years has there been recorded a case of transferred infection, even though those who deny the supernatural effects of Lourdes have watched eagerly for some such evidence to use as a weapon against the shrine. On the contrary, scientific experiments have proved that all microbes immediately lose their virulence as soon as they come into contact with the Lourdes waters. Dr. Mazzeo of the Naples Institute of Hygiene has shown that animals injected with microbes subjected to Lourdes waters do not develop disease, but similar animals injected with similar microbes subjected to the water of a local river died within a few days. Nor, apart from the germs, has any harm ever come from the cold to anyone immersed in the baths at Lourdes, which is hardly less extraordinary. Heart cases, tuberculosis victims, the dying are all plunged into the waters and all of them stand the experience without complications and without fatigue. We have never known a case to be worse after a bath. . . . Here is a phenomenon beyond medical reasoning; this is what I call the continual miracle of Lourdes which cannot be explained by science and which is outside the normal laws of hygiene."

Speaking purely from the point of view of personal persuasion, I find it in my heart to echo all that Dr. Leuret has to say. Never shall I forget the day, many years ago, when I received a phone call, kindly requesting me to bring the sacra-

ment of Holy Communion to an elderly gentleman dying of cancer of the mouth and throat. After having communicated the element of the Body, I brought to his waiting lips the tiny silver chalice containing the consecrated wine. As soon as he had sipped the Blood of our Lord, I proceeded to the conclusion of the service.

The attending nurse, who was not a Churchman and had not received the sacramental Presence, was watching me closely as I took care of the ablutions. This final act involves the cleansing of the sacred vessels used in the celebration of the holy mysteries, preceded by the priest's consuming any of the consecrated elements of the bread and the wine which may be left over. As I started to consume the trace of wine which remained, and to run my lips about the edge of the miniature chalice, the nurse lunged forward and knocked the cup out of my hands. Luckily, I had already consumed the dregs of the wine which had remained over and above the sip of which the cancerous old gentleman had reverently partaken; so when the little chalice went spinning out of my surprised hands and rolled dizzily to a far corner of the bedroom, nothing was lost —except my decorum. Startled, I automatically started to remonstrate, when I saw the nurse's look of horror turn to one of obvious embarrassment.

As she mumbled words of apology, laced with overtones of rebuke, the truth of the situation suddenly dawned upon me. Being a registered nurse, faithful in the fulfillment of her duties, she was understandably shocked (not being a Churchman) at my seemingly heedless act in bringing to my own lips the same chalice and the same wine which had just touched the badly infected mouth of her patient. An ordinary cup, filled with ordinary wine, would certainly have been an excellent carrier of infection. But there was the point which she, in her antiseptic zeal, had missed. This was not a common cup; nor

was it filled merely with *vin ordinaire*. Rather, this was the chalice of Christ, filled with sacramental wine consecrated to the reality of His Blood. And if a man literally believes in the Real Presence, whether it broods lovingly over Lourdes, or is caught up within the chalice of a country chapel or of a sick man's bedroom, no harm can possibly come to any believer who partakes thereof. God is the One who heals, not hurts.

Listen, if you will, to London's Dr. Christopher Woodard, as he speaks to this point in his provocative book, *A Doctor Heals By Faith:* "It does seem most unwholesome for people to share water which has been contaminated by all sorts of unpleasant skin diseases and discharging wounds, but as nobody goes into these baths save as an act of faith, believing that the water can heal, I can well believe that any harm that might be done by ordinary water under similar circumstances is in some way removed at Lourdes. This is in keeping with beliefs that I have expressed before, because I am coming more and more to feel that *thinking* a thing can do you harm is a major factor in *producing* such harm; and equally the opposite holds, so that at a place like Lourdes no harm is done because the very idea that it could do harm never enters the minds of those seeking aid."[1]

XI. THE CASE OF BABY DAVID

IRRESPECTIVE OF THE SHAPE which the attempt at a cure may take, the one indispensable ingredient in any ministry of healing is the prayerful act of faith. If this statement seems to smack of the obvious, it is certainly not too obvious to point out that there is nothing necessarily cut and dried about the manifold ways by which faith can be seen surely in operation.

All too often you see a puzzled Christian shrug his shoulders as he says, "It just plain doesn't figure. Time and time again the faith*less* are made whole, the faith*ful* remain bruised and broken." In the first place, as was noted in an earlier chapter, the pain suffered by a faithful steward of God's mysteries can always be put to constructive use. There is no such thing—at least for a faithful adherent to the Judeo-Christian tradition—as trouble totally devoid of any possible meaning for good.

Contrariwise, a patent lack of faith on the part of a healed patient does not preclude the possible presence of a creative conviction on the part of some soul lovingly concerned about the apparently faithless one. If faith is indeed the substance of things hoped for, as well as the evidence of things unseen, then it surely follows that we are here dealing with the kind of imponderables which may be put to positive use, when believing individuals in the over-all picture permit God to use them to the full.

Furthermore, it is not the part of wisdom to overlook the fact that our Father pours out His compassion upon the unjust, no less than upon the just. The Day of Judgment awaits all of us, and the unjust—facing it uneasily—will certainly have the reward of their evil. Meanwhile, however, God's love is no respecter of persons. By the same token, His care also extends to those who are too young or too immature to make an act of faith on their own behalf. Consider, if you will, the case of Baby David.

This infant was the three-months-old child of a young couple whose marriage I had been privileged to solemnize two years before. Jane and George were a happy, carefree pair; and the weight of the world rested as lightly upon their shoulders as it does upon the shoulders of any healthy youngsters whose absorbing love for each other creates its own self-contained universe. But suddenly their sunlit world exploded before their shocked eyes. Almost overnight, their beloved first-born had fallen ill, and his condition was worsening with alarming rapidity.

Because little David's grandfather was an eminent New York surgeon, able to drop in upon his feverish grandson two or three times a day, as well as to consult daily with the attending pediatrician, the family maintained its prayerful equilibrium. A bronchial inflammation is never, of course, to be treated lightly; and David's loved ones did not so treat it. On the one hand, the latest and most potent "miracle" drugs were carefully administered, one variety of antibiotic after another. On the other hand, prayers went up daily from the altar of the local parish and from the individual hearts of those concernedly gathered about the distressed infant.

Bad colds seem to strike little children with unexpected suddenness and intensity, often retreating as quickly as they come. And every watchful mother knows with what terrifying speed

a baby's temperature can shoot up to disturbing heights in the red-columned thermometer. But when one night, a few days after the onslaught of the bronchial congestion, David's temperature soared to almost 106 degrees, the physicians lost no time in rushing the tiny child to the hospital.

So it was that, shortly after midnight of January 10, 1955, this apparently dying child was hurried into the children's ward. His "broncho-pneumonia and tachycardia with hyperthermia," as the hospital record had it, had evidently reached the climax of its virulence. In the written words of the attending doctor, little David's temperature, which had already spurted to an alarming height, had now "spiked" to a shocking 107.4 degrees. In the dark hours of that early morning, these sobering statements were written into the record: "Critically ill . . . lower extremities rigid . . . child is cyanotic. . . ." As an indication of the remarkably unusual height to which this infant's temperature had soared, the standard hospital chart is not calibrated to record any degree higher than one hundred and six. Thus it is that my set of photostatic copies of the complete chart on this case indicates how the physician had to lift his angled line above the last noted recording, and write 107.4 degrees in longhand.

Meanwhile, the prayers continued to be offered, and the antibiotics administered. Never shall I forget the sight of the baby's surgeon-grandfather, with the helplessness of a specialist in one field having to depend upon a specialist in another field, importuning the pediatrician to *do* something. And the pediatrician, who had stood faithfully at the infant's crib long hours on end through the dark night, felt equally helpless.

"Please," he said to the drawn and shaken grandfather, "try to realize that we're doing everything under Heaven for him. You keep suggesting one drug after another. Believe me when I tell you—here's the chart—that every indicated therapy has

been or is being tried. He's just not responding.... Tell me, has the baby been baptized?"

"No. He would have been, but George is still overseas with the Army, and Jane wanted to wait until he could be here. Why?"

The pediatrician's voice held a note of deadly quiet. "You'd better have it attended to, Warren, and as soon as possible. I can't be sure that he has more than a few hours to live."

That's when I was called in. As, masked and robed, I walked into the room, the nurses—seeking to lower the fantastic temperature which was burning the child up—were swiftly immersing him in a small tub of cool water. The empurpled infant was rigid and gasping feebly. To disturb the nurses and doctors as little as possible, I simply asked for a bowl of water.

Then, according to the rite in the Book of Common Prayer, I humbly besought God to "sanctify this Water to the mystical washing away of sin." Removing my hand from the blessed water, I then poured some of it upon the infant's mottled head, saying as I did so, "David, I baptize thee In the Name of the Father, and of the Son, and of the Holy Ghost." Finally, making the sign of the Cross upon the baby's hot forehead in the holy water, I said, "We receive this Child into the congregation of Christ's flock; and do sign him with the sign of the Cross, in token that hereafter he shall not be ashamed to confess the faith of Christ crucified, and manfully to fight under his banner, against sin, the world, and the devil; and to continue Christ's faithful soldier and servant unto his life's end. Amen."

The next morning, when I returned to check on the dying infant, I chanced to meet the pediatrician in the corridor. "Hell, man," he blurted, "what in God's name did you do to that baby?"

"Probably nothing. Otherwise, you've got it right. Whatever did happen *was* done in God's name. What was it?"

"Well, it's medically incomprehensible. No doctor likes the word 'miracle.' But if you pushed me into a corner and said I had to use that term at least once in my professional experience, this is the case I'd use it on."

"What happened?"

"Everything. After the baptism, instead of dying within the hour—which he had a pretty good chance of doing—his temperature dropped several degrees and stayed down; the rigidity disappeared; and his normal color and breathing returned."

Within seventeen days of his emergency admission to the hospital, David was discharged as cured and was returned to the welcoming arms of a mother and father who have never ceased to be thankful. By the time that this story is being written, almost four full years have passed since that terror-ridden January night when it looked as though their baby was beyond mortal aid.

Lest any misconceptions be inadvertently allowed to creep into this recitation of the bare facts of a dramatic story, it is imperative that two points be emphasized. First, as regards the unremitting prayers of family, clergy, and friends, no demanding petitions were ever offered up, to the best of our knowledge. To give God directions is to insult His wisdom. To insist upon what our limited insight tells us is right is to question His infinite overseeing. To specify a definite outcome is to imply that no other outcome has any virtue. To importune God narrowly is to short-circuit our communications with Him. All of this would be sinful, since it would demand the gift without reference to the Giver.

Instead, as an indelible mark of our caring, these prayers were offered not only on behalf of the overtaxed heart in the feebly burning body, but also on behalf of the uncounted individuals and elements surrounding the infant on every side. Since there is obviously more to life than meets the naked eye, these were

the individuals and the elements upon which so much might be depending to tip the scales one way or the other.

There were the prayers for the attending physicians and internes, that their minds—despite the stress of their own personal problems—might yet be given the grace to be clear and dedicated. As for the nurses, there were the fervent petitions that their hearts might be open and their hands steady. And so it went. The prayers were thus offered up in the teeming hours of the bustling day and in the silent watches of the painful night. For sharers in the completion of an as yet unfinished creation, communication with God is a two-way street. In the communion of the saints, here and beyond, the Lord can be most effective with those who are most responsive.

In the second place, let it be quickly stated that the rite of Holy Baptism was not primarily performed with the idea of securing a prolongation of the baby's earthly life. Christ nowhere even remotely hinted that the celebration of a sacramental act possessed the character of a bargain astutely entered into. You don't sign on the dotted line, thereby assuring yourself of the Biblical threescore years and ten, to say nothing of the birthday cake of a Methuselah. To walk with God is not to guarantee a graybearded old age.

On the other hand, a man preparing for a journey, long or short, is wise if he sees to it that his papers are always in the best of order, especially if he be a stranger and a sojourner in a city in which he is destined to have no continuing residence. He may have no wish to travel beyond the boundaries of his local bailiwick. But in the event that he may suddenly have to weigh anchor and launch out into the deep, it is well for him to have his passport properly stamped, in order that his welcome upon the farther shore may be more readily expedited.

To be blessed is at least to touch the hem of a garment not of our own making. It is, in this transitory world, to be linked to

those things which are abiding. And if Christ, in His compassionate wisdom, deemed certain acts of consecration worthy of being prayerfully observed, what virtue can possibly lie in turning one's back upon them? It's as though the clay presumed to have more discernment than the potter.

There is not the remotest trace of black magic in the sacramental life. The infant David might easily have followed the doctor's prognosis and have died the very moment after his christening. In the physical sense of the word, then, the act of Holy Baptism would have been a life-or-death matter. In a much more profound sense of the word, his fleshly response to the sacramental act was of no great concern. An immortal life having been, on his behalf, commended into God's keeping, the purely earthly duration of that combination of mortal flesh and blood was necessarily of secondary importance. Under the eyes of God, the baby's eternal journey *there* was surely of no less consequence than his temporal journey *here*. When a human being is blessed as richly as our dedicated stewardship can manage, then God's grace goes with him, and no permanent harm can happen to him. The very jaws of death itself become toothless.

The infant David, we said, might have died before the baptismal waters had dried upon his feverish head. And we pointed out that, under the conditions of the blessing, a mundane departure from this level of life to a higher would not have been an intolerable tragedy, at least not from the Christian point of view. Or the child might yet grow into a hedonistic and heedless lump of a man, unwilling to use his God-given gifts, and loath to take upon his own shoulders the spiritual promises invoked upon his behalf, back in that far-off day of infancy when he lay at the point of death. But whether or not he chooses to exercise the blessings bestowed upon him in acts of thanksgiving, he will nevertheless have been given the strength for the

fighting of a battle too fierce to be properly fought alone, whether the earthly part of his life be hoary and mellow with age or sharply nipped in the nascent bud.

It is not given mankind to know by precisely what techniques these unique blessings can be unfailingly bestowed or made unvaryingly effectual. It is still true that to be able to prove the *fact* of God would be to destroy the *meaning* of God. To act upon an act of faith is the only action which God expects of men. And wherever outgoing love of God is offered—love, that is, without demand of reward—there will faith be forever effective.

One of Britain's most experienced psychotherapists, Dr. J. A. Hadfield, speaks of this corporate love as it flowers within the sacramental life of the Church. He says, "A personal relation is established with a God who is as perfect as we can conceive Him; and not with an imperfect man (as would be the case in conventional psychotherapy). In the Christian religion this personal relation is pre-eminently a relation of love, which can sweep away repressing and inhibiting complexes, and liberate the forces lying latent in the soul of the patient, restoring him to life and health. Spiritual healing brings the diseased soul into conscious personal touch with the spiritual, and these religious influences have a power to awaken love and to bring peace and happiness unpossessed by scientific treatment alone. . . . Could we command such a revolution of love in the soul, it would be at once the most effective treatment for those diseases now laboriously treated by psychotherapy. But we cannot kindle where we would the fire that in the soul resides."

Assuredly, we cannot *force* love into being. A love which came by force, rather than by volition, would no longer be love but slavery. We also agree that spiritual influences possess powers unknown to the solely scientific approach. But since science is quite properly satisfied with nothing less than all

knowledge for its province, the current scene is peopled with at least a smattering of interested physicists, for example, who are intrigued by the evident realities present in any honest ministry of healing, and who are patiently searching for a lowest denominator common to all such ministries. Thus far, they have been able to do no more than merely nibble at the edge of the unknown. But one of them, Julius Weinberger, the aforementioned physicist with the Radio Corporation of America, has tentatively postulated the following hypothesis.

He feels that this world contains a "spiritual healing force" which flows from a boundless supply and is transmitted through the healer to the patient, carrying within itself the intelligence to cure the specific disease from which the patient suffers. This hypothetical force, he surmises, is non-spatial. That is, the matter of distance between the healer and patient does not necessarily play any part in the curative proceedings.

Weinberger's theory, and the experiments which are being evolved therefrom, deserve a book of their own. Meanwhile, perhaps the most provocative of his surmises concerns the possibility that the spiritual healing force may conceivably operate on at least three different levels of energy. His own tentative explorations on the scientific plane have thus far been largely involved with the third of these three possible levels. All available evidence points, he suspects, to the following:

(1) A high level, flowing to the *healer's* spirit, and thence across to the *patient's* spirit. This might be the case in Church healing services [the loving congregation?—Author] or in prayer groups or in distant healings.

(2) An intermediate level, flowing to the healer's mind, and thence across to the patient's. This phenomenon might correspond to what we ordinarily consider as love, empathy, and compassion.

(3) A low level, flowing through the healer's body and on

to the patient's body, through contact with the healer's hands. This is the force which many healers claim they experience as an actual sensation during curative treatments.

Be all of this as it may, no man interested in the ministry of healing need ask more of God than that he be privileged to end his work as he began it. That is to say, his goal need never be more than the possessing and the conveying of that love which "cures sometimes, relieves often, and comforts always" in the name of the healing Christ.

XII. CONCERNING "THE CHURCH'S MINISTRY OF HEALING"*

SENSING THE RAPIDLY mounting ground swell of world-wide interest in the ministry of healing, the Anglican convocations of Canterbury and York requested that an official commission be appointed "To consider the theological, medical, psychological and pastoral aspects of 'Divine Healing' with a view to providing within two or three years a report designed to guide the Church to clearer understanding of the subject; and in particular to help the clergy in the exercise of the ministry of healing and to encourage increasing understanding and co-operation between them and the medical profession."

This mandate was issued in the fall of 1953, and the completed work of the Commission was fortunately made available in America just as this book was about to go to press in 1958.[1] Before commenting directly upon the report itself, as it may apply to *The Ministry of Healing* now in your hands, it is worth noting how promptly the Commission expressed its dissatisfaction with the term used in the original request: "Divine Healing."

* "The Church's Ministry of Healing" is the title of the Report of the Archbishops' Commission of the Convocations of Canterbury and York in the Church of England.

The very first chapter quite properly seeks to clear the air by defining the terms employed in the report. It flatly notes that the Church is basically concerned with the redemption of the whole man, and that the cure of his fleshly ailments is only one element in its over-all ministry to him. This being true, the phrase "Divine Healing" invites the misconception of partiality. As the report puts it, "It conceals the fact that in one sense all healing is divine, and it may well imply that God only shows his concern for the sick by means of extraordinary cures effected by those healing ministrations which are so called—a view which completely misrepresents divine providence."

By the same token, the Commission is not at home with the word "spiritual" as currently applied to certain methods of non-medical healing, since the term may be taken to imply that other techniques are necessarily *not* spiritual. Parenthetically, it is relevant to note at this juncture that an increasing number of pastors, doctors, and lay healers in the United States are tackling this problem in semantics by suggesting the use of the term "spiritual therapy," in contradistinction to those other valid therapies which primarily seek to heal the individual by way of his body, his emotions, or his intellect. But perhaps most of us, in agreement with the Archbishops' Commission, would prefer the phrase "the ministry of healing," especially since the word "ministry" commonly connotes an approach to the needs of the whole man by means of his immortal soul, rather than by means of an initial contact through his body or his mind. This decision is cordially compatible with the report's general principles that (1) the human body matters, (2) the eternal is supreme, and (3) man is a unity, with body and soul intimately and inevitably interdependent.

Having thus completed the preliminary task of establishing the Commission's basic premises, one moves on to the main body of the report and notes that its chief tone is unfortunately

one of too careful conciliation. In the face of medically inexplicable healings, it's almost as though the Commission were saying, "Could be; but you can't prove it by us." Now, conciliation is a virtue, and compromises on this level of life are inevitable. But when the evidence stares you in the face, the time is ripe to say with the blind boy in the New Testament story, "I don't know anything about the credentials of the healer—and you can't prove his techniques by me. All I do know is that whereas I was blind, now I see!"

In all fairness, it must be admitted that when you are dealing with a profound mystery about which almost everybody is a neophyte, you naturally tend to walk gingerly, as on thin ice. Perhaps my own enthusiasm for the subject has unwittingly led me into the pitfall of an untenable subjectivity. But when you care enough about sin and suffering—and when you have become a missionary proclaiming the Gospel wonders of non-material healings—then you know that a coolly dispassionate objectivity is not the *ultima thule*. If you have seen a sufficient number of troubled souls relieved and even cured of diseases by non-physical means, you understandably want to encourage such a ministry of healing. And you're eager to convince your medical brethren of the reality of this recaptured revelation. But you don't really care whether they think you insane or not. Even when eminently respectable authorities do consider you reprehensibly off-beat, you are comforted in recalling our Lord's admonition, "Beware when all men speak well of you!"

You see, in this whole mysterious field of healing by non-physical means, the practitioner has only two choices. Either he can call valid only those cures which (as at Lourdes) meet the judgment of scientific standards, or he can assume that ultimate proof must by its very nature lie outside the practical competence of medical science. In the latter case, the pastor is free to go about his pastoral task without fretting over what the

physician or the psychiatrist may be thinking of him, for if God and the pastor and the patient are all thankfully aware of an act of healing, every other consideration is pragmatically peripheral.

All of this is not to say that the Archbishops' Commission failed to consider any possible evidences of non-medical cures. As a matter of fact, one of the report's most perceptive chapters is given over to this question of evidence. To do the Commission full justice on this important point—as well as to indicate the commendable level of its thinking—we hereby quote at length from the opening paragraphs of the report's third chapter.

"Readers of this Report will not unnaturally ask whether the Commission has received any convincing evidence that the Church's non-medical ministry to the sick is effective in bringing about physical healing.

"Evidence," the report continues, "may be said to be that by which the truth of an assertion may be tested. But a claim that healing has been brought about by non-medical means may involve a number of different assertions. There is first the assertion that the sick man has, in fact, been healed; there may be the assertion that the healing depended on some specific non-medical intervention; there may be the assertion that the healing is extraordinary and medically inexplicable; and there may be a further assertion that the 'cause' of the healing was supernatural. These assertions are not of the same order and therefore it is necessary to distinguish them carefully and to enquire what kind of 'evidence' is appropriate in each instance; otherwise confusion ensues."

Taking apt note of the fact that these various kinds of assertions are classically found within the pages of the Bible itself, the report continues with marked discernment as follows:

"St. Peter's cure of the lame man at the gate of the Temple

(Acts 3:1-11) is a case in point. The *fact of healing* is affirmed in the description of the man's condition before and after the event: he was 'lame from his mother's womb' and had to be carried every day to the place where he begged; but afterwards 'his feet and his ankle bones received strength' and he leaped up and entered the Temple 'walking and leaping and praising God' in the sight of many witnesses. Secondly, it is plainly implied that the healing depended on Peter's *intervention* since it occurred when Peter told him to rise up and walk, and not at any other point in the long period of his illness. Thirdly, the *extraordinary* nature of the healing is affirmed both in the description of the change effected and particularly in the statement that his limbs were strengthened 'immediately.' Fourthly, a *supernatural* cause is affirmed in Peter's words before the High Priest next day: 'If we this day be examined of the good deed done to the impotent man, by what means he is made whole; be it known unto you . . . that by the name of Jesus Christ of Nazareth . . . doth this man stand here before you whole' (Acts 4:9-10)."

So far, so good—and the adducing of a New Testament record of the reality of non-medical healing adds validity to the discipleship of those who, trusting in the faithfulness of our blessed Lord's promises, believe Him when He says, "Greater things than these shall ye do!" It is therefore this next quoted paragraph which demands our closest attention, for it is at this juncture that the Commission's study of the evidence offered by various physicians and lay practitioners ends on a regrettable note, which I have italicized. After having demonstrated the reality of non-medical healing in terms of a New Testament document, regardless of the presence or absence of scientific attestation, the report lamely retreats behind the materialistic conviction that laboratory evidence must be adjudged the court of last resort.

The paragraph whose conclusions unhappily negate so much of the Commission's admirable investigation is appended as follows:

"A claim that healing has been brought about by non-medical means involves first the assertion that the bodily or mental condition of a patient has, as a matter of fact, changed for the better. It is clear that this is, in principle, subject to scientific verification, though it may not always be so in practice, either because the initial condition was not reliably established, or because the patient was not completely examined after the change was alleged to have occurred. Such testimony as we have received on this point endorses the judgment of the B.M.A. Committee [the British Medical Association, which the Archbishops' Commission invited to sit in with it] that some, at any rate, of the assertions of healing prove on testing to be mistaken: either medical diagnosis does not confirm the condition supposed to have been remedied; or a remission characteristic of a particular disease has been mistaken for lasting betterment; or functional improvement (for instance, an arthritic being enabled temporarily to move stiffened joints without pain although the underlying condition remains unchanged) has been mistaken for organic recovery. *But so far as the reality and nature of a change in a patient's condition are concerned, scientific evidence is entirely appropriate and, when sufficient, decisive.*"

This conclusion constitutes a complete capitulation to purely materialistic forces. It flatly implies that the wondrous healings of Jesus Christ and of His disciples—all the way from Peter to the man who healed in the Lord's name five minutes ago—are ultimately to be validated or rejected upon the judgmental decision of some white-coated gentleman in a gleamingly modern laboratory.

Elsewhere the Archbishops' Commission states: "The claim

that a particular healing is medically extraordinary is an assertion of a scientific order and scientific testing is clearly the proper way of determining its truth. But it may be possible, for several reasons, to doubt whether the investigator in a given case has secured quite the same objectivity as is clearly obtainable in testing the bare fact of healing."

This is precisely the point at theological issue. The second sentence of the above quotation frankly implies that the laboratory technician may be faced with the impossible task of trying to measure the Holy Spirit with a pair of calipers. In such a case, it would be like trying to add up an apple and a grand piano. Each has its function and its virtue, but they simply do not belong in the same category. Nevertheless, despite the Commission's question involving the scientific investigator's qualifications, the report still bluntly insists that the scientist shall have the last word.

The Archbishops' Commission was, in all humility, quick to ask that a committee of medical men be formed to sit with the Commission in consultation, for the theologians quite rightly disqualified themselves as judges in the scientific area of material phenomena. But if the Churchmen felt themselves incompetent to pass judgment in the field of the physical, what process of logic led them to believe that the scientists were competent to pass judgment in the world of the spiritual?

The crux of the matter would seem to be this. The *nature* of a material change does indeed lie within the rightful province of medical practice. That is, the scientist may correctly decide that the change for the better is really merely functional, and that the organic disability, for example, still exists. And so it may truly be, at least from what the X rays say.

However, the *reality* of the same material change does *not* necessarily lie within the province of the scientist. The paraphernalia of the laboratory may unerringly demonstrate that

the flesh in question is still organically diseased. But if the organically imperfect individual—who yesterday was bedridden—is today able to be actively up and about for an indefinite period of time, with never a sign of relapse, then the medical evidence is at best merely academic and thus totally irrelevant on the level of simple practicality.

In short, the Commission's treatment of this matter of "evidence" is fairly typical of the tenor of the entire report. Except for an appendix justly critical of Christian Science and of Spiritualism, it makes certain that it offends nobody. But if it offends nobody, neither does it stimulate anybody. It is solid, good, and remarkably unimaginative.

As was pointed out in an earlier chapter of this book, no thoughtful man will argue with the lofty and exact standards of laboratory science at its best. The fanatically rigorous ideals of the Medical Bureau at Lourdes, for example, are completely commendable and should obviously not be adulterated or eased one whit. The world is already too thoroughly peppered with fakirs, unwitting or otherwise, for any man to speak ill or lightly of those who dedicate their lives to the uncovering of charlatanism or uncritical self-deception in any of its manifold forms. And if the objective standards of scientific medical practice are to be scuttled or sabotaged, our remaining foundations are shaky indeed.

But God still works in mysterious ways, His wonders to perform. To insist, for instance, that evidence of a cure must automatically be thrown out of court, unless the laboratory can demonstrate that the healing was *organic,* as well as *functional,* is first of all to declare that material medicine knows all there is to know in this vast universe. Second, it is to tell the dancing and leaping lame man that his ankle bones are still helplessly malformed and that he therefore *can't* be leaping and dancing —which is about as sensible as some of the delightfully wry and

irrational arguments in *Alice in Wonderland.* And third, this line of reasoning is tantamount to telling God that if He does something which science, at least at its present level of knowledge, can't understand or prove, then in reality He hasn't actually done it. All of this tends to give us a Deity so impotent as to be promptly treated as an undesirable alien, worth nothing more than to be deported from the world of His own making. And that way lies heresy.

Speaking of heresy, the matter of Christian Science is another question entirely. No other organized sect or group makes such an absolute claim to healing as does Christian Science. The public has no accurate knowledge of how fast this heterodox body is growing, or what its total membership is. But compared with many other denominations, its rate of growth and its actual membership are both notable, and its influence is considerable. So whenever orthodoxy deals with the subject of health, it must always also deal, sooner or later, with the subject of Christian Science.

Now, virtually all of us would probably agree that certain of the tenets of Christian Science are entirely commendable. At least from the point of view of the Judeo-Christian tradition, we would have no argument with the emphasis upon God's goodness and compassion. We would also be glad to agree, even without being orthodox in our theology, that such emotions as fear and resentment can either cause or intensify sickness, and that a growing edge of faith can actually transform a man's life, and may even induce bodily changes for the better.

But the central doctrine of Christian Science is that of healing through knowledge. It insists that since God is pure spirit, only the spiritual good is real. In such a case, it would thus follow that a thing which was not good was really nonexistent. Matter, the body, evil, sin, disease, death—all these are there-

fore only figments of a regrettable illusion, to be eradicated by the right kind of knowledge.

It is in its insistence upon this heresy that Christian Science breaks with both the Old and the New Testaments, as well as almost two thousand years of orthodox Christian history. The body as the temple of the spirit becomes meaningless; the reality of our Lord's physical pain is completely washed out; and His redemptive act upon the Cross of Calvary becomes an empty mockery.

Speaking to this point, the report of the Archbishops' Commission quite rightly notes that this heresy is most clearly seen "in its doctrine of God: God is all and man's spirit is part of God. This is Pantheism, the blurring of any distinction between the Creator and the Creation. Again, it renders any doctrine of the Incarnation impossible: those who teach that the body is unreal cannot logically, and do not in fact, believe that the eternal Son of God took human flesh and lived in the body. Again, Christian Science has no belief in Christ's Atonement, for it considers evil and sin to be unreal fabrications of men's minds needing for their conquest, not the sacrifice of Christ, penitence and forgiveness, but the knowledge which Christian Science claims to impart. Moreover, since pain and death are believed to be unreal, Christian Science cannot hold that Christ actually died; and it follows that it has no belief in the bodily resurrection of our Lord. When it is added that the coming of the Holy Spirit is equated with the foundation of Christian Science, enough will have been said to show that Christian Science is not Christian in the commonly accepted sense of that word."

To this one might fairly add that it's not only not Christian; it's not Science either. But to return, in conclusion, to science with a small "s," let it be repeated that this book decries neither the achievements, nor yet the continuing advancements, of

modern science. It is simply that the writer, having seen in action "the greater things" which Christ promised through His disciples, is uneasy at the hesitancy of the Church to accept any result in the ministry of healing which fails to be equipped with the ultimate stamp and seal of scientific approbation. As a matter of fact, medical practice at its best approves of much of what reputable men and women in the ministry of healing are currently achieving in their quiet way. The irony of this whole business is that it is all too often the Church, not medicine, which stands in the way of recognition and acceptance of this branch of the Lord's ministry.

If the Church is really to be the Body of Christ—and not merely a hat-tipping mendicant before the sterilized doors of the medical laboratory—it must be willing to launch out into the deep and cast its net on the other side of the ship, even though the waters be turbulent, the tides unknown, and the charts sketchy.

Meanwhile, the proof of the voyage is a joyful arrival at the prearranged port of call, under full sail, and with all hands properly accounted for.

XIII. THE BIBLE SPEAKS THE FINAL WORD

EVEN THE MEREST neophyte on the subject, no matter how grossly untutored he may be, possesses at least intimations of the fact that the Church's ministry of healing can somehow trace its origins back to the Bible. But perhaps no one short of the astute student —and then only after considerable reading and research—is fully aware of the range and frequency of evidently miraculous healings in Holy Scripture.

In the New Testament, healing is patently as significant a part of the whole Christian ministry as are teaching and preaching. The four Gospels contain the records of thirty-eight such cures, almost all at the hands of Jesus. And the book of the Acts of the Apostles notes the stories of nine distinct healings, largely through the offices of Peter and Paul, but also including John and Ananias (not the liar!) and many other disciples.

Some of these remarkable reports are quoted by only one writer, whereas certain others are repeated by other recorders of the Gospel. Not counting any repetitions, we therefore arrive at a total of forty-seven specific instances of a non-medical ministry of healing on the part of Jesus and His followers.

In this connection, a most valuable volume is Nellie Woods' *The Healings of the Bible,* published by Hawthorn Books,

New York. The author has painstakingly compiled a complete record of all the various healings which pepper the pages of both the Old and the New Testaments. It stands, therefore, as an exhaustive listing of all the cures wonderfully achieved by the Old Testament prophets, by Christ Himself, and by His Apostles and lesser followers. And, after having given chapter and verse in each instance, the author transcribes the story in the exact words of the King James version.

The Healings of the Bible thus serves as a much-needed handbook of the original sources of its subject. Most of us already knew that manifold examples of healings were on record in the Bible as ultimate examples of God's creative action. Few people, however, have either the time or the patience to ferret out each dramatic example from within the whole text of Holy Scripture, which is precisely why Mrs. Woods' book is such an important manual of reference to have at hand whenever the subject of the ministry of healing comes under serious discussion.

Meanwhile, there is here appended a numbered listing (not necessarily in chronological order, since we can't possibly know what the exact sequence actually may have been) of all of the New Testament healings as they are recorded, one by one. In each instance, a brief sentence describes the character of the occurrence, followed by the one or more references to where the story itself is to be found.

(1) Jesus, finding Peter's mother-in-law flushed with fever, stands over her and takes her by the hand, whereupon the temperature leaves her:

St. Mark 1:30-31
St. Matthew 8:14-15
St. Luke 4:38-39

(2) One evening in Capernaum, in the course of His many healings, Jesus restores individuals who are possessed of devils:

St. Mark 1:32-34, 39
St. Matthew 8:16
St. Luke 4:40-41

(3) Moved with compassion, Jesus touches a leper and, in the act of touching him, cures him:

St. Mark 1:40-42
St. Matthew 8:1-3
St. Luke 5:12-14

(4) In His encounter with a palsied man, Jesus bids the man to be of good cheer, for He has just absolved him of his sins; whereupon, noting that the scribes are therein accusing Him of blasphemy, the Lord demonstrates the visible validity of His authority by empowering the forgiven man to rise from his bed and walk:

St. Mark 2:3-12
St. Matthew 9:2-7
St. Luke 5:18-25

(5) Angered and grieved by the hardness of His critics' hearts, Jesus insists upon the fitness of healing on the sabbath, and does so in the act of restoring a man's withered hand:

St. Mark 3:1-5
St. Matthew 12:10-13
St. Luke 6:6-10

(6) In the process of healing certain individuals in the multitude Jesus feels Himself sapped of strength:

St. Mark 3:9-11
St. Luke 6:17-19

(7) Jesus restores the daughter of the synagogue ruler Jairus, who thought his ailing child to be at the point of death, if not already dead:

St. Mark 5:22-23, 35-42
St. Matthew 9:18-19, 23-25
St. Luke 8:41-42, 49-55

(8) The hemorrhaging woman who, after twelve years of having "suffered many things of many physicians" and having "spent all that she had, and was nothing bettered, but rather grew worse," secretly slips up to Jesus in the midst of the crowd and, touching the hem of His garment, is promptly healed—but again, not without His feeling a depletion of energy:

St. Mark: 5:24-34
St. Luke 8:43-48

(9) As a classic illustration of the ironic point that a prophet is indeed without honor in his own country, Jesus is able to do no mighty work in Galilee, other than to lay His hands upon a few diseased individuals and thereby heal them:

St. Mark 6:5

(10) The disciples, on a missionary journey through the country of the Gadarenes, exorcise uncounted demons, and cure the sick by means of the sacramental rite of Holy Unction—healing every*where*, if not every*body*:

St. Mark 6:13
St. Luke 9:6

(11) In Gennesaret, the sick are laid out in the street, that

they might touch the hem of Christ's garment as He slowly passes by; and as many as do manage to touch Him are indeed healed:

St. Mark 6:56

(12) In this curing of a deaf-mute, the Gospel writer goes into some detail concerning the technique which Jesus employs:

St. Mark 7:31-35

(13) Upon the occasion of His restoring of sight to the blind man at Bethsaida, Jesus lays His hands a second time upon the man's eyes, in order to sharpen the vision which, after the first laying on of hands, had returned but fuzzily:

St. Mark 8:22-25

(14) In this series of public healings, at least two facts stand out: first, the eager crowds came from as far away as Decapolis and beyond the Jordan; and second, the mentally and emotionally ill were given back their sanity:

St. Matthew 4:23-25

(15) The cure of the centurion's servant provides an outstanding example of how the healing Christ can effect cures *in absentia,* thus illuminating the truth that, while the laying on of hands is indeed the New Testament norm, our Lord's power is in no way limited by geography:

St. Matthew 8:5-10, 13
St. Luke 7:2-10

(16) In this story of the Gadarene swine and of the demon who, when confronted by Jesus, says that his name is Legion because he is one of many, it is typical of demonic spirits that

they recognize the perfect goodness of the Christ and are furiously frustrated by it:

St. Mark 5:2-13
St. Matthew 8:28-32
St. Luke 8:27-35

(17) It may be worthy of note that the faith of a mother—so persistent that it is remarked upon by Jesus—apparently has much to do with the ultimate healing of her demon-possessed daughter:

St. Mark 7:24-30
St. Matthew 15:21-28

(18) The disciples who, on previous occasions, have been able to achieve those "greater things" which Christ had promised them, are now helpless to cure an epileptic child, thus calling forth our Lord's reminder that certain diseases can be overcome only by means of the healer's own faithful fasting and prayer:

St. Mark 9:17-29
St. Matthew 17:14-21
St. Luke 9:38-42

(19) When the wondering crowds witness Christ's uncanny healing of the lame, the blind, the dumb, and the maimed, their creative response is not primarily to congratulate their cured friends and neighbors, but rather to glorify God first of all:

St. Matthew 15:29-31

(20) In the gift of the restoration of sight to the two blind men of Galilee, it should be noted that, although a sense of *expectancy* is in no wise a guarantee of healing, it is neverthe-

less one of the important concomitants of the curative process:
St. Matthew 9:27-31

(21) In this case of a dumb man possessed of a devil, it seems reasonably clear that his demon-possession is the factor which has been robbing him of the power of normal speech:
St. Matthew 9:32-33, 35

(22) Even if repetition be involved in any of these Biblical records, it is none the less still significant to note how often an individual is driven off on a tangent—physically, if not also emotionally and spiritually—by what the New Testament insistently calls "demon-possession": a state in which the individual, having literally lost himself to a devil, desperately needs the exorcising which Christ can uniquely administer:
St. Matthew 12:22
St. Luke 11:14

(23) Although Christ seeks, more often than not, to touch individual souls personally, His compassion always goes out spontaneously to the multitudes; so is it recorded that He "healed them that had *need* of healing":
St. Matthew 14:14
St. Luke 9:11

(24) The crowds in Judea, no less than the multitudes earlier and nearer home, are healed wherever healing among them is called for:
St. Matthew 19:2

(25) Blind Bartimaeus receives his sight:
St. Mark 10:46-52
St. Luke 18:35-43

(26) Because Jesus uses the Temple at Jerusalem as the scene of more than one of His remarkable healings, it becomes clear that He specifically has chosen the orthodox tradition—and the outward framework of that tradition—as the accepted channel of His healing ministry:

St. Matthew 21:14

(27) Again—and in the synagogue itself—Jesus practices His curative work, and the devil within the tortured and convulsed demoniac reluctantly recognizes and obeys the prayerfully invoked power of God, especially in the precincts of His own abode:

St. Mark 1:23-27
St. Luke 4:33-35

(28) Lest the infinite love of Christ be questioned, the raising from the dead of the son of the widow of Nain illustrates the power of God (as in the case of dead Lazarus also) to do *here* what He normally does *hereafter*:

St. Luke 7:12-15

(29) Because so large a proportion of the cures thus far recorded have been obviously physical in character, irrespective of whatever else they may have thankfully included, the story of the regeneration of the sinful woman who sacrificially pours the precious ointment over our Lord's feet is a story eminently worth noting:

St. Luke 7:37-50

(30) Jesus straightens the spine of a woman who, for eighteen years, had been seriously crippled with a bone disease:

St. Luke 13:11-13

(31) In this brief account of Christ's healing of a man afflicted with dropsy, His critics of sabbath-day cures are apparently so put out of countenance by our Lord's power and love that they hold their peace:

St. Luke 14:1-4

(32) After obeying Christ's command that they show themselves to the priest, ten lepers are cleansed of their corrosive disease, but only one is sufficiently thoughtful and grateful to return to the Lord to offer heartfelt thanks:

St. Luke 17:12-19

(33) Jesus performs a surgical healing, as it were, upon the severed ear of Malchus, the high priest's servant, who has accompanied the band coming to arrest the Lord:

St. Luke 22:50-51

(34) In curing the sick son of a certain nobleman, Jesus once again demonstrates the power of the "absent" treatment, a boon to those in isolated places who can neither visit a healer nor set themselves in the midst of a loving congregation within the Body of Christ:

St. John 4:46-53

(35) In the narrative of the angel who annually comes to riffle the waters of the pool at Bethesda, Jesus strengthens a man who had been crippled for thirty-eight years, but He ends by admonishing the man (whom He has later met again in the Temple) to sin no more, lest he bring a worse disease upon himself:

St. John 5:1-9, 14

(36) Employing spittle and clay, Christ brings sight to the man who, blind from birth, is rightly unconcerned about the

whys, the wherefores, and the techniques used by his unknown benefactor, but rather is simply grateful that whereas he had been sightless, now he can see:

St. John 9:1-41

(37) In the raising of Lazarus, we see one of the rare instances of Christ's bringing a man back from the beyond to this level of life again, an act which (under the circumstances surrounding the event) He may well have performed as a dramatic example of the truth that He is indeed the resurrection and the life:

St. John 11:1-44

(38) Lest one be tempted to overemphasize the purely material aspects of Christ's ministry of healing, it is well to note that He carefully equates the preaching of the Gospel with acts which achieve bodily betterment:

St. Matthew 11:4-5
St. Luke 7:21-22

Leaving the record of healings as they appear in the four Gospel accounts, we now continue with the Biblical records of the ministry of healing as carried on by Christ's disciples, after His resurrection and ascension. This, then, is the record of the Church in action as the Body of Christ—the extension of the Incarnation in history.

(39) A lame beggar, lying at the Temple gate called Beautiful, is instantly strengthened by Peter and John:

Acts 3:1-8

(40) So famous has the healing ministry of the Apostles already become, that many people believe the very shadow of

Peter, for example, to be effectual in conveying an actual blessing—as would any personal possession of Paul's also:

Acts 5:12, 15-21
Acts 19:11-12

(41) Saul of Tarsus—now converted and called Paul—has his sight restored at the hands of Ananias:

Acts 9:1-18

(42) Invoking the name of Jesus Christ, Peter is able to heal a man who had been bedridden with palsy for eight years:

Acts 9:32-35

(43) Peter brings back to life a woman who has presumably just died:

Acts 9:36-42

(44) A man born with malformed feet is made whole by Paul:

Acts 14:8-10

(45) Paul, evidently irritated by the uncanny perception of a soothsaying girl who was apparently a so-called "sensitive" or medium, commands that the extrasensory spirit come out of her—which, in the name of Jesus, it does:

Acts 16:16-18

(46) Paul is empowered to bring back to fullness of life a man who, having fallen from a considerable height, is believed dead:

Acts 20:9-12

(47) Shipwrecked on the island of Malta, Paul is hospitably treated by Publius, governor of the isle, whose father is ill of fever and dysentery, and whom Paul cures by the laying on of hands:

Acts 28:8-9

XIV. SUMMARY: THE MINISTRY OF HEALING

PROBABLY NO SUBJECT IN the entire life of the Church is surrounded and encumbered by more misconceptions than that of spiritual healing. To the regular practitioner, the title seems self-evident. But millions of interested people are frankly puzzled by it.

Some think it's an illegitimate offspring of Christian Science. Some think of it as a black-magic hangover from the Middle Ages. Others look upon it as a timid stepchild of psychiatry. And still others conceive of it as a back-door way of bargaining with God, whereby (in exchange for a few muttered prayers) your ulcer or arthritis or migraine headache is banished forever.

Spiritual healing is none of these things. As its very name implies, it is simply an ancient, Biblical, and classic way of re-opening, re-aligning, or otherwise re-activating the thruway of the soul between man and his Creator. If an individual is at sixes-and-sevens with his brethren and/or his God, it stands to reason that both his emotions and his body are likely to be thrown out of kilter also.

Therefore, just as it is the task of the physician to minister to the malfunctioning flesh, and just as it is equally the task of the psychiatrist to redirect the derailed emotional life, so is it the

job of the minister of healing to bring God's grace and peace to the starved, choked, or inward-turning soul.

In short, when *physical* well-being results from the Church's ministry of healing, it's much like parentheses thrown into the middle of a paragraph. (That is, it's only a happy by-product of a deeper healing!)

That's the way it was in the ministry of Jesus Himself. In more cases than not, outward health came back to a sick man only after an earlier event in the divine encounter. Before the flesh was made whole again, our Lord had said something like this: "Thy sins be forgiven thee." Obviously, something wrong *inside* the man had been, in part at least, responsible for something wrong *outside* the man.

In this connection, it must be noted that Christ did not automatically heal everybody. We don't say that He couldn't. We simply note that He didn't. There are worse things to be endured than an inadequate body. And there are few heresies worse than the one which makes the *temple* of the spirit more important than the spirit itself.

Jesus Christ was not the Chief Inspector of the Department of Sanitation. Nor is the City of God named Miltown. Our Lord came primarily not to make us *well* men, but rather to make us *better* men. And being well is not the same thing as being better.

Furthermore, since health means wholeness—and since Christ came to redeem the whole man—it follows that the better man is more likely to be the whole man, and that the whole man is, in the most profound sense of the word, ultimately the well man.

Let it here also be noted that pain need never be meaningless to a Christian. With the sin of pride upon us, it's a well-known fact that most of us learn the hard way. More men have risen to nobility from a bed of pain than from a bed of roses.

The Christian who means business is the one who says, "Lord, I'd like to serve You from a throne. But if need be, I'm willing to serve You from a cross. In either case, I'm determined to serve You. And in that event, the state of my flesh is not of paramount importance." If you are seeking health, it's well to note that the true north of the compass points in that direction.

A great deal of our suffering, however, is admittedly needless, which is where the ministry of healing comes in. This is a sacramental universe. Pure spirit is unknown and unknowable to us, except it is mediated through the physical. That's one of the implications of the Incarnation. We don't know the meaning of love, for example, until the day we first see love in action. Webster does us no good at all, except as we are given to see the verbal definition translated into visible sacrifice.

So it is that at any public healing service, the priest need possess no special gifts of his own. He is simply a spokesman of the Lord, mediating God's grace on behalf of a loving congregation ingathered to worship Christ in His sacramental Presence. They are there, in His name, to pray for wholeness in themselves, as well as for wholeness in those others for whom their thanksgivings and petitions are offered up. This loving congregation is the dynamo which goes into action "whenever two or three are gathered together in My name," says the Lord. So does the pure spirit of the risen Christ operate via His *penitent* stewards in the sacramental rite of Holy Unction and the Laying-on-of-Hands (Book of Common Prayer, page 320) which are often immediately preceded by a thankful celebration of the Holy Communion.

Finally, let this be said of spiritual healing. If, in our imperfections, our failures are many, so by the grace of God our successes may also be many. Meanwhile, we can take as our goal the aim of all those who seek to cure in Christ's name: "To heal sometimes, to relieve often, to comfort always"!

NOTES

Chapter I

1. Preface by Charles A. Lindbergh, in *Journey to Lourdes,* by Alexis Carrel (London: Hamish Hamilton, 1950).
2. "The Higher Pantheism."
3. Carrel, *op. cit.*
4. *Psychology, Religion, and Healing,* by Leslie D. Weatherhead (Nashville: Abingdon Press, 1951).

Chapter III

1. Cyril Richardson, in *Healing: Human and Divine,* edited by Simon Doniger (New York: Association Press, 1957).
2. *A Doctor Heals By Faith,* by Christopher Woodard (London: Max Parrish and Co., Ltd., 1953).
3. Used by permission.
4. Richardson, *op. cit.*

Chapter IV

1. Richardson, *op. cit.*
2. *Ibid.*

Chapter V

1. Reprinted from *The Angel That Troubled the Waters, and Other Plays,* by Thornton Wilder. Copyright 1928, 1956 by Coward-McCann, Inc.

Chapter VII

1. L. Harold De Wolf, in *Healing: Human and Divine.*
2. *Ibid.*

Chapter IX

1. Much of the material in this and the following chapter is summarized from a series of articles by Rhona Churchill, "The Miracles of Lourdes," which appeared in the London *Daily Mail.*

Chapter X

1. Woodard, *op. cit.*

Chapter XII

1. *The Church's Ministry of Healing* is published by the Church Information Board, Church House, Westminster, S.W.1, London, England, price 2/6d, postage extra.

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